

The Mental Health (Care and Treatment) (Scotland) Act 2003

Short Term Detention Certificate

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Instructions v7.1

The following form is to be used:

Write clearly within the boxes in BLOCK CAPITALS

and in BLACK or BLUE ink

Where the conditions for the granting of a short-term detention certificate are met.

For example

There is no statutory requirement that you use this form but you are strongly recommended to do so. This form draws attention to some procedural requirements under the Mental Health (Care and Treatment) (Scotland) Act 2003. Failure to observe procedural requirements may invalidate the certificate.

If you are not completing this form electronically, please observe the following conventions, to ensure accuracy of information:

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DET 2 v7.1

GMC Number

medical records, not just filed in case notes

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To be completed by the Approved Medical Practitioner

Detention Criteria

As the AMP named on page 1, I declare that I have examined the patient. I am granting this short-term detention certificate because I believe the patient meets the criteria set out in section 44(4):

(a) I consider that it is likely, for the reasons stated below, that the patient has the following type(s) of mental disorder

				Primary ICD 11 Code	
	Mental illness	○ Yes	○ No	Please enter primary ICD 11 diagnosis code for each disorder present.	
	Personality disorder	○ Yes	\bigcirc No	Click here for ICD11 Coding Tool	7
	Learning disability	○ Yes	○ No	•	J

1	

(b) I consider that it is likely, for the reasons stated below, that because of this mental disorder, the patient's ability to make decisions about the provision of medical treatment for that mental disorder is significantly impaired.

2	



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	CERT	

To be completed by the Approved Medical Practitioner

Dete	ention Criteria (cont)
(c)	I consider that it is likely, for the reasons stated below, that it is necessary to detain the patient in hospital for the purpose of:
	determining what medical treatment for mental disorder should be given to the patientgiving medical treatment to the patient.
3	
(d)	I consider that it is likely, for the reasons stated below, that if the patient were not detained in hospital there
(σ)	would be a significant risk-
	to the health, safety or welfare of the patientto the safety of any other person.
4	
(e)	I consider that it is likely, for the reasons stated below, that the granting of this short-term detention certificate is necessary e.g. explain why the patient cannot be treated on a voluntary basis.
5	



PART 1 : CERTIFICAT	E (co	nt)																								
Consultation - MHO (1	o be c	omp	lete	d by	th	е М	НО	{se	ee n	ote	s})															
MHO details - Surname																		Τ		T						
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MHO Signature																										
Signed by the MHO																										
Date	/ [/																	J						
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Wherever practicable, the MHO should complete this section of the form. Where not practicable, the RMO should complete on behalf of the MHO, and include reasons why it was not practicable in box 6.



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PATIENT ETHNICITY v7.1

The following information is requested to monitor the use of the Mental Health (Care & Treatment) (Scotland) Act 2003 across ethnic groups to ensure observance of equal opportunity requirements

Patient CHI Number	
The patient describes	his / her ethnic group as:
<i></i>	O Information not provided
A White	O Scottish
	O Other British
	O Irish
	O Gypsy/ Traveller
	O Polish
	O Roma
	O Showman/ Showwoman
	O Any other white ethnic group, please describe
B Mixed or multiple ethnic groups	O Any mixed or multiple ethnic groups, please describe
C Asian, Scottish Asian or British Asian	O Pakistani, Scottish Pakistani or British Pakistani
OI BIIIISII ASIAII	O Indian, Scottish Indian or British Indian
	O Bangladeshi, Scottish Bangladeshi or British Bangladeshi
	O Chinese, Scottish Chinese or British Chinese
	O Any other Asian, please describe
D African, Scottish African or British African	O Please describe, for example Nigerian, Somali
E Carribean or black	O Please describe, for example Scottish Carribean, Black Scottish
F Other ethnic group	O Arab, Scottish Arab or British Arab
	O Other, please describe, for example Sikh, Jewish



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