A BILL

FOR

AN ACT TO MAKE PROVISIONS FOR THE MANAGEMENT OF MENTAL HEALTH IN NIGERIA AND FOR RELATED MATTERS

Sponsored by Senator Kushamu Burunji

[ ] Commencement

BE IT ENACTED by the National Assembly of the Federal Republic of Nigeria as follows:

PART I - GENERAL

1. The Act may be cited as Mental Health Bill, 2015 — Citation

2. In the Act, unless the context otherwise requires: — Application

(a) "Mental Disorder" means any disability or disorder of mind or brain, whether permanent or temporary, which results in an impairment or disturbance of mental functioning. Social deviance or conflict alone without disturbance of mental functioning is not mental disorder;

(b) "mental impairment" means a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning and is associated with abnormally aggressive or seriously irresponsible conduct on the part of the person concerned.

PART II - INSTITUTIONS FOR THE CARE OF PERSONS WITH MENTAL DISORDERS

3.-(1) The Government of the Federation, or of a State, or of a Local Government Area; or a private organization or an individual, may establish and maintain hospitals and medical facilities even in penal institutions, for the treatment and care of persons with mental and behavioural disorders and for the training of medical and other health personnel for the treatment of such persons. — Establishment of Institutions

(2) The Minister may by order published in the Gazette, appoint the whole or part of any public building with any houses, grounds or

premises belonging thereto, which meets stipulated minimum standard, to be a mental health facility. Accordingly, all such places which existed before the commencement of this Act shall be deemed to have been appoint and under this Act.

(3) The Minister may in like manner declare that any place shall cease to be a mental health facility.

(4) For any facility to be designated as Psychiatric Hospital for the purpose of this section, it shall comply with such conditions (as it relates to .the quality and number of personnel, the number of beds in the hospital, the equipment and facilities provided in the hospital) as the Minister may from time to time prescribe.

(5) There shall be appointed for each Psychiatric Hospital established pursuant to this Act a Medical Director who shall be a Medical Practitioner recognised by the Medical and Dental Council of Nigeria as having special training and requisite experience in the diagnosis and treatment of persons with mental and behavioural disorders.

(6) There shall also be appointed for each Psychiatric Hospital such medical practitioners, practitioners in such fields allied to medicine and any other staff as may be deemed necessary by the hospital management.

(7) There shall be established in each general hospital and other similar medical institutions separate wards for admission and care of patients with mental and behavioural disorder.

(8) There shall be established in all Primary Health tare Centres a component unit for referral services and follow up care for persons with mental disorder.

PART III - ADMISSION AND DISCHARGE OF PATIENTS

Voluntary Admission

4. Any person who requires treatment for mental disorder, may be admitted voluntarily into any hospital or other facility approved for that purpose by the government, pursuant to Section 3 of this Act.

Compulsory Admission

5.-(1) A person may be admitted to a hospital and there detained for periods specified by sections of this Part of the Act on an application for admission for observation on grounds that:

(a) he is suffering from mental and behavioural disorder of a nature or degree which warrants his compulsory admission in a hospital for observation (with or without medical treatment) for a limited period; and

(b) he ought to be so detained in the interest of his own safety or with a view to protecting the safety and interest of other persons.

(2) An application pursuant to Subsection (1) of this section shall be made on the written recommendation oral medical practitioner in the prescribed form stating that the conditions set out in paragraphs (a) and (b) of Subsection (1)- of the section are satisfied.

(3) A patient admitted pursuant to this section may be detained for a period not exceeding 28 days, beginning with the day on which he is admitted. He may however be detained thereafter if he becomes liable for compulsory admission again by virtue of a subsequent application, order, or direction under any of the following provisions of this Act.

Emergency Application

6.-(1) An emergency application may be made either by a health care worker or by any relative of the patient in case of urgent necessity for the patient to be admitted and detained under Section 5 of this Act, but compliance with the provisions of the Act relating to application for admission for observation would involve undesirable delay.

(2) A patient admitted pursuant to this section may be detained for a period of 3 days beginning with the day on which the application was made.

Application for Admission for Treatment

7.-(1) A person may be admitted to a hospital and there detained pursuant to an application for admission for treatment made in accordance with the following provisions of this section.

(2) An application for admission for treatment may be made in respect of a patient on the grounds set out in paragraphs (a) and (b) of Subsection (1) of Section 5.

(3) An application for treatment it shall be founded on the 'written recommendations of two medical practitioners, who shall each state that in his opinion:

(a) the patient is suffering from one or more of the forms of mental disorder referred to in Section 2 of this Act;

(b) That the conditions set out in Subsection 2 of this section are met.

Application for compulsory admission

8.-(1) Subject to the provisions of this Act, an application for the compulsory admission of a patient for observation or treatment following a period of compulsory admission for observation pursuant to Subsection 3 of Section 5 may be made either by the nearest relative of the patient or a health worker, and shall be addressed to the Medical Director of the hospital to which admission is sought.

(2) The consent of the nearest relative of the patient is needed to make the application, unless it becomes clear that in the circumstances further consultations to achieve this would occasion unreasonable delay.

Medical Recommendation for Admission of a Patient

9.-(1) the medical recommendation necessary to back up an application for admission of a patient pursuant to the provisions of a of Section 8 shall be given by two medical practitioners who have personally examined the patient either together or at an interval of not more than 7 days, and shall be signed on or before the date of the application.

(2) One of the two medical practitioners required for the purposed of Subsection (1) of this section shall be a medical practitioner who is a specialist psychiatrist, or one with the experience in the diagnosis and treatment of mental disorder.

Effect of Application for Admission

10.-(1) An application for admission of a patient to a hospital under the provisions of this part of this Act duly completed in accordance therewith shall be' sufficient authority for the applicant, or any person authorised by him to take and convey the patient to the hospital specified in such application:

(a) in case of an emergency application, within 3 days beginning with the date on which the patient was examined by the medical practitioner giving

the recommendation referred to in Section 5 of this Act, at with the date of the application whichever is earlier;

(b) in the case of an application other than an emergency application, within 14 days beginning with the date on which the patient was last examined by a. medical practitioner before giving the medical recommendation.

(2) The application shall be sufficient for the Medical Director of the hospital to which the patient is taken to detain him in the hospital in accordance with the provisions of this Act.

(3) The application shall be sufficient to render any previous application under this part of the Act by virtue of which he was liable to be detained in a-hospital no longer effective.

(4) A patient admitted to a hospital pursuant to an application for admission arid treatment may apply to a Mental Health Review Tribunal within' six months from the day on which he was so admitted.

Application in respect of Patient already in Hospital

11. An application for the admission of a patient to a hospital may be made under this part of this Act as follows:

(a) in the case of an application for admission for treatment of a patient who is already liable for detention for observation, where an application is so made, the patient shall be treated for the purposes of the Act as if he had been admitted to the hospital at the time when the application was received by the Medical Director of the hospital;

(b) in the case of a patient under no detention application or order, if it appears to the medical practitioner in charge of the patient that an application ought to be made under this part of this Act for admission he may furnish a report in writing to that effect to the medical director of the hospital, and in such cases, the patient may be detained in the hospital for a period of3 days from the day on which the report is furnished, pending when all other necessary conditions pursuant to Sections 8 and 9 may be satisfied.

Rectification of Application and Recommendation

12.-(1) If an application for admission for observation or for treatment or any medical recommendation given for the purposes of the application is found to be defective or incorrect and this is within a period not exceeding 14 days beginning with the day on which the patient is admitted to a hospital pursuant to the application, the medical director of the hospital shall give consent for the defect or error to be rectified by the person by whom the application or recommendation was signed; and the said application or recommendation shall have effect and shall be deemed to have had effect as if it has been originally made as eventually amended.

(2) If either of the medical recommendations given in accordance with the provisions of this part of this Act is found insufficient to warrant the patient's detention pursuant to the application, the medical director of the hospital may within the fourteen days mentioned in Subsection (1) of this section give notice in writing to that effect. A fresh medical recommendation complying with the relevant provisions of this part of this Act (other than the provisions relating to the time, signature, and the interval between examination) submitted to the medical director within that period shall suffice, provided that the other medical recommendation on which the application is founded too also complies with all the relevant provisions.

Duration of Authority for Detention and Renewal

13.-(1) A patient admitted pursuant to an application for admission for treatment may be detained in a hospital for a period of 365 days beginning with the day o~ which the patient was so admitted, but shall not be detained for any longer period unless the authority for his subsequent detention is renewed under the provisions of this section.

(2) Authority for the detention of a patient who has not previously been discharged may be renewed under this section for periods of 365 days at a time if it appears to the medical officer to be expedient. Provided that the medical director of the hospital shall cause the patient to be informed on each occasion, and the patient informed of his right to apply to a Mental Health Review Tribunal.

Removal of Patient to a place of safety

14.-(1) Where a Police Officer or a staff of Social Welfare Department of Government funds in a place to which the public has access, a person who appears to him to be suffering from mental and behavioural disorder and to be in immediate need of care or control, the police officer or social welfare worker, as the case may be, may if he thinks it necessary to do in the interest of that person or for the protection of other persons, remove that person to a place of safety with a view to making an application for his treatment and care under this Act.

(2) A person removed to a place of safety under this section may be detained there for period not exceeding 72 hours for the purpose of enabling him to be examined by a medical practitioner and of making any necessary arrangements for his treatment or care.

(3) A police officer or any other person required or authorised by this Act to take any person into custody or to conveyor to detain any person shall for the purposes of taking him into custody or conveying or detaining him, have all the powers, authority, protection and privilege of a police officer in the ordinary course of his duties as such.

(4) If any person being in lawful custody by virtue of this section escapes, he may be retaken and returned to the hospital or place of safety:

(a) by the person who had his custody 'immediately before the escape; or

(b) by any officer or the staff of the hospital, his nearest relative or his guardian, or by a police officer if at the time of his escape he was liable to be detained in a hospital.

Grant of Leave of Absence from Hospital

15.-(1) The responsible medical officer may grant to any patient who is for the time being liable to be detained in a hospital under this Act, leave to be absent from the hospital subject to such conditions, as that officer considers necessary in the interest of the patient or for the protection of other persons.

(2) Leave of absence may be granted under this Section .either

indefinitely or for a specified period; and where leave is granted for a specified period, that period may be further extended as the responsible medical officer may deem fit.

(3) The responsible medical officer may by notice in writing' to the patient or to the person for the meantime in charge of the patient, revoke the leave of absence for the recall of the patient to the hospital if it appears to him that it is necessary so to do in the interest of the patient's health and safety and for the protection of others.

(4) A patient to whom a leave of absence is granted, under this section shall not be recalled under Subsection (3) of this Section after he has ceased to be liable to be detained under this Act.

(5) In all cases of removal of patient to hospital for the first time or removal of a patient who breaches the condition of leave of absence, the police shall be available to render assistance.

Order of Discharge of a Patient

16. An order for discharge in respect of a patient detained under any section of this part of this Act may be made:

(a) by the responsible medical officer or 'by. the medical director of the hospital, where the patient is detained pursuant to an application for admission of observation; or

(b) by the responsible medical officer, the medical director, or by the nearest relation, where the patient is detained pursuant to an application for admission for treatment. In other cases, the order shall be made pursuant to the responsible medical officer's report that the circumstances leading to his detention in the first place no longer exist.

Order of Discharge of a Nearest relative

17.-(1) Subject to the provisions of this section, the patient's nearest relative may at anytime apply for the discharge of a patient detained in hospital.

(2) The nearest relative of the patient in making such an application shall. give a notice in writing in that regard not less than 72 hours to the medical director. In the event .that the responsible medical officer furnishes the medical director. of the hospital a report within 72 hours that in his opinion the patient, if

discharged, would be likely to act in a manner dangerous to himself and to other persons:

(a) the application by the relative will not be granted;

(b) no further application for discharge of that patient shall be entertained from that relative during a period of 3 months beginning with the date of the medical report;. and

(c) the medical director of the hospital shall cause the nearest relative of the patient to be informed of his right to apply to a Mental Health Review Tribunal iJ;1 respect of the patient within a period 9f 28 days beginning with the day on which he is so informed.

PART IV - ADMISSION OF PATIENTS CONCERNED WITHIN CRIMINAL PROCEEDINGS

Power of Court to order Hospital Admission

18.-(1) Where a person is convicted before a High Court of a criminal offence, or before a Magistrate's Court of an offence punishable on summary conviction with imprisonment, the court may by a hospital order authorise his admission for observation in a hospital if it has cause to suspect that the person may be suffering from mental disorder.

(2) Where the court is satisfied, on written evidence made within seven days of admission of two medical practitioners, one of whom is recognised to have special experience in' the diagnosis and treatment of mental and behavioural disorders that:

(a) the offender is suffering from mental disorder, severe mental impairment or dis-social disorder;

(b) the mental disorder is of a severe nature or degree which warrants the detention of the patient in a hospital for medical treatment; and

(c) the offender is likely to benefit from such treatment with respect to future criminal tendency and behaviour.

The court may decide that the most suitable method of disposing of the case is by means of an order under this section.

(3) Where an order is made under this section, the Court shall cause

the further detention of the criminal in the hospital where the initial assessment of his mental state was made for further treatment until the patient (criminal) is assessed as having made sufficient improvement to be discharged there from, and a report in that respect from the medical practitioners who made the initial assessment is placed before the court.

(4) On receiving such a report, the Court shall order the discharge of the patient from hospital within three days of receiving the report.

(5) The provisions of this section shall apply in the case of a substance abuser in breach of the provisions of the National Drug Law Enforcement Agency Act.

Compulsory Order

19. Where the patient has not made satisfactory progress with treatment pursuant to Subsection (3) of Section 18 within six months of the initial order, and a report in that respect from the medical practitioners referred to in Section 18 is placed before the court, the court shall, in the interest of public safety issue a compulsory order for the detention and treatment of the patient for another period of six months and for multiple periods of six months thereafter, provided that:

(a) the patient shall be advised on his right to appeal to the Mental Health Review Tribunal; and

(b) a medical report on the desirability of subsequent detention and treatment of the patient in the interest of public safety is made on each occasion.

Compulsory Order with Restriction

20.-(1) Where the Court receives a report from the medical practitioners referred to in Section 18 to the effect that the mental disorder from which the patient is suffering is of such severity as to warrant maximum restriction of that patient, the Court shall issue a compulsory order with restriction provided that the patient shall be advised on his right to appeal to the Mental Health Review Tribunal of his case.

(2) A compulsory order with restriction shall not be issued by a Court unless the Court in its wisdom and having regard to all the circumstances

including the nature, character and antecedents of the offender and to the other available options (including terms of imprisonment) of dealing with him that the most suitable method of disposing of the case taking into cognisance the issue of public safety is by means of an order under this section.

The Child offender

21.-(1) If in the case of a child or young person brought before a juvenile or other court:

(a) the court is satisfied that the young person is in need of care or protection that his parent or guardian is unable to control him, as the case may; and

(b) the conditions which under Section 18 of this Act are required to be satisfied for the making of a hospital order in respect of a person convicted as herein mentioned are so far as applicable, satisfied in the case of the child or young person; the court shall have the like power to make a hospital order or guardian as if the child or young person had been' convicted by the court of an offence punishable on summary conviction with imprisonment and provisions of the said Section 18 shall with the necessary modifications and substitutions apply accordingly.

Removal to Hospital of Persons service Sentence of imprisonment

22.-(1) If in the case of a person serving a sentence of imprisonment, the Minister or the Governor, as the case may be is satisfied by the report, of a medical practitioner who has special experience in the diagnosis and treatment of mental and behavioural disorders:

(a) that the said person is suffering from a mental and behavioural disorder, severe mental impairment or dis-social disorder; and

(b) that the mental disorder is of a nature or degree which warrants the detention of the patient in a hospital for medical treatment, the Minister or Governor may, if he is of opinion having regard to the public interest and all the circumstances that it is expedient to do so, direct by warrant, that the person be so removed and detained in such hospital as- may be specified in the directive.

(2) The transfer directive in the context of Subsection (1) of this section shall have the like force as a hospital order made in accordance with the provisions of Section 18 of this Act.

(3) The foregoing provisions of this section shall apply for the purpose of the transfer of any person in custody pending trial as they apply for the purpose of any person serving a sentence of imprisonment.

(4) For the purposes of this Section:

(a) the Minister shall exercise the power to give a transfer directive in the case of a person convicted of an offence committed under any enactment made by the Government of the Federation; and

(b) the Governor shall exercise the power to issue a directive in respect of a person convicted for an offence committed under an enactment made by the Government of a State.

Mental Health Review Tribunal

23.-(1) The Minister may, for the purpose of dealing with applications and reference by and in respect of patient under this Act constitute for each State or group of States, such number of Mental Health Review Tribunals, as he may with the approval of the President determine."

(2) Each Mental Health Review Tribunal shall consist of such members as the Minister may by order published in the Gazette decide, which order shall similarly specify the regulation of the proceedings of the Tribunal.

(3) The Mental Health Review Tribunal shall function in protecting the interests of patients who are subject to the provisions of this Act. In doing so, it shall review treatments that require a second opinion, visit detained patients and investigate complaints, keep under. review the exercise of statutory powers relating to detained patients, and carry out any other function as may be directed by the Minister.

PART V - PROPERTY AND AFFAIRS OF PATIENTS

Application of this Part

24.-(1) The provisions of this part shall apply in respect of a person, who in the considered opinion of a High Court Judge based on competent medical evidence is incapable by reason of mental disorder of managing and

administering his property and affairs; and a person whom the Judge is satisfied to refer to as a patient for purpose of this Part of this Act.

General function of the Judge with respect to property

25.-(1) The judge may, with respect to the property and affairs of a patient, do or secure the doing of all such things as to him appear necessary or expedient:

(a) for the maintenance or other benefit of the patient;

(b) for the maintenance or other benefit of members of the patient's family;

(c) for making provision for other persons or purposes for whom or which the patient might be expected to provide if he were not mentally disordered; or

(d) otherwise for administering the patient's affairs.

(2) (a) In the exercise of the powers conferred by this section, regard shall be had first of all to the requirements of the patient, and the rules of law which restrict the enforcement by a creditor of rights against property under the control of the Judge.

(b) Subject to the provisions of paragraph (a) in this subsection, the Judge shall, in administering a patient's affairs, have regard to the interests of creditors and also the desirability of making provisions for obligations of the patient notwithstanding that they may not be legally enforceable.

(3) Without prejudice to the provisions of Subsection (2) of this section; the Judge shall have power to make such orders and give such directions and authorities as he thinks fit, for the purposes of that section and in particular may make orders or give directives or authorities for:

(a) the control (with or without the transfer or vesting of property or the payment into court of money or securities) and management of any property of the patients;

(b) the settlement of any property of the patient or the gift of any property of the patient to any person;

(c) the carrying on by any suitable person of any profession, trade

or business of the patient;

(d) the sale, exchange, charging or other disposition of any property of the patient;

(e) the acquisition of any property in the name of the patient;

(f) the dissolution of any property of which the patient is a member;

(g) the carrying out of any property of which the patient is a member;

(h) the conduct of any legal proceedings in the name of the patient or on his behalf;

(i) the reimbursement out of the property of the patient, with or without interest, of money applied by any person for or for the benefit of the patient; or

(j) the exercise of any power vested in the patient (including a power of consent) whether beneficially or as a guardian, trustee or otherwise however.

Judge's power in case of Emergency

J **26.** Where it is represented to the Judge and he has reason to believe that a person may be incapable by reason of mental disorder of managing or administering his property and affairs, and the Judge is of opinion that it is necessary to make immediately provision for any of the matters referred to in Section 25 of the Act, the Judge may exercise any of the powers conferred on him by the said Section 25, so far as is requisite for enabling that provision to be made, pending the question whether the said person is incapable as aforesaid.

PART VI -TREATMENT

Consent to treatment

27.-(1) This part of this Applies to any patient referred to in any section of this Act.

(2) The following forms of medical treatment for mental disorder and behavioural disorders shall require consent:

(a) any surgical operation for destroying brain tissue or for destroying the function of the brain tissue; and

(b) such other forms of treatment requiring explanation of known risks to the patient to enable the patient to decide whether or not to accept such form of treatment.

(3) A patient shall not be given any form of treatment unless:

(a) the responsible medical officer or a registered medical practitioner has certified in writing that the patient is capable of understanding the nature, purpose any likely effects of the treatment and has consented to it; or

(b) the medical officer referred to in paragraph (a) of this subsection certifies in writing that the patient has not consented to the treatment for reason of incapacitation or other, but that having regard to the likelihood of its alleviating or preventing a deterioration of his condition, the treatment should be given.

(4) A patient may, at any time before the completion of treatment for which he had previously given consent, withdraw such consent in writing if he so desires.

(5) Subsections (2) (a) and (b) of this section shall not apply to any treatment:

(a) which is immediately to save 'the patient's life;

(b) which (not being irreversible) is immediately necessary .to prevent a deterioration of his condition;

(c) which (not being irreversible or hazardous) is immediately necessary to alleviate serious suffering by , the patient; or

(d) which (not being irreversible or hazardous) is immediately necessary and represents the minimum interference necessary to prevent the patient from violence or being a danger to himself or to others.

(6) In all circumstances the responsible medical officer shall take into account the condition of the patient, the need to obtain consent from the nearest relative, periods of lucid intervals and his/her personal moral decision to obtain consent.

PART VII - OFFENCES UNDER THIS ACT

Forgery or False Entry of Statements

28.-(1) Any person Who with intent to deceive, forges or willfully makes false entry or statement in any of the following documents:

(a) an application for admission under this Act;

(b) any medical report or recommendation under this Act;

(c) any other document required or authorised to be made for any of the purposes of this Act.

(2) Any person guilty of an offence under this section of this Act hall be prosecuted and if found liable shall be convicted to prosecution for a term not exceeding 2 years or to a fine of Nl00,000 or to both.

Sexual Relationship with Patient

29.-(1) It shall be an offence under this section for a man or a woman who is an officer or staff or is otherwise employed in or is one of the managers of a Psychiatric hospital to have sexual relationship (intercourse) with a woman or a man as the case may be who is:

(a) for the time being receiving treatment for mental disorder in that hospital;

(b) subject to his/her guardianship or otherwise in his/her custody or care under this Act in Psychiatric Hospital or other similar approved institution for the treatment of mentally, disorder persons.

(c) for the time being receiving treatment as an out-patient.

(2) Any person guilty of an offence under this section shall be liable to prosecution, and on conviction, to imprisonment for a term not exceeding l year or to a fine of Nl00,000,or both of them. This shall not be prejudicial to any other sanctions and such a person may be liable to from bodies to which he may belong as a member.

(3) No proceedings shall be instituted for an offence under this section, except by or with the consent of the Attorney-General of the State concerned.

Assisting Patient to unlawful leave of Absence

30.-(1) Any person who induces or knowingly assists any other person:

(a) being liable to be detained in a hospital to absent himself without leave; or

(b) being in legal custody by virtue of this Act to escape from such

custody, shall be guilty of an offence.

(2) Any person who knowingly harbours a patient who is absent without leave of absent or is otherwise at large and liable to be retaken into custody; or gives him assistance with intent to prevent, hinder or interfere with his being taken into custody or returned to the hospital or other place or where he ought to be detained shall be guilty of an offence.

(3) Any person guilty of an offence under this section shall be liable on conviction to 3 months imprisonment or to a fine of N100,000, or both of them.

PART VIII - IMMUNITY SAVINGS AND TRANSITIONAL PROVISIONS

Immunity from Legal Proceedings

31.-(1) No person shall be liable on any ground to civil or criminal proceedings to which he would have' been liable apart from this section in respect of any "act done pursuant to this Act or any regulations or rules made under or in respect of anything done in discharge of any functions conferred by this Act, unless such act was done in bad faith or without reasonable care.

(2) No civil or criminal proceedings shall be brought without leave of the Attorney-General of the State concerned who shall not give such leave unless he is satisfied that there is substantial ground for the contention that the person to be prosecuted has acted in bad faith or without reasonable care.

Minister's power to make regulations

32.-(1) The Minister may, with the approval of the President, Commander-in-Chief of the Armed Forces, make regulations, for prescribing anything which under this Act ought to be prescribed and such regulation or regulations shall be published in the Federal Government Gazette.

(2) Without prejudice to the generality, of the provisions of Subsection (1) of this section the regulations made under that subsection may:

(a) specify the hospitals and other institutions with facilities for the time being for the reception, and treatment of patients requiring treatment and care for mental disorder;

(b) specify access to the public into Psychiatric Hospitals and similar other institutions, and their conduct while in such premises; and

(c) such other things as may appear to be lacking in this Act but necessary to achieve the aims and goals of the Act.

Interpretation

33. In this Act, unless the context otherwise requires

(a) "court order" means an order made out by court committing a criminal offender before the court to compulsory admission with or without restriction to a psychiatric facility for observation, assessment and advice on his mental state;

(b) "hospital order" means an order signed by two doctors, one of whom shall be a psychiatric doctor committing a patient for detention in a psychiatric facility for observation and treatment;

(c) "leave of absence" means a period of trial away from hospital granted by the responsible medical officer so as to enable the patient's family to take him home to observe him and report on his progress with treatment;

(d) "medical director" means the chief executive medical practitioner in charge of a psychiatric hospital to which this Act applies;

(e) "medical practitioner" means a medical graduate registered within the meaning of Medical and Dental Practitioners Act, 1988;

(f) "responsible medical officer" means a medical practitioner in charge of a patient's case;

(g) "mental health professional/welfare" includes a qualified psychiatrist, a medical officer working in a psychiatric hospital or unit, a clinical psychologist, a psychiatric social worker, a psychiatric nurse;

(h) "Minister" means the Minister charged with the responsibility for matters relating to Mental Health;

(i) "nearest relative" in relation to a patient, includes a husband or wife, son or daughter, father or mother, brother or sister, grandparent or grandchild, uncle or aunt, nephew/nice or cousin;

(j) "patient" means a person suffering or appearing to be suffering

from mental disorder;

(k) "place of safety" in relation to the patient includes police station or post, a hospital, any place of reverence - Church, Mosque, Palace.

SCHEDULE

FORM A

CERTIFICATE OF ADMISSION

Section 5

I certify that it is expedient for the welfare and safety of ..... that he should be forthwith placed under observation and treatment for a period not exceeding .....days.

My reasons for this conclusion are as follows—

.....
.....
.....
.....
.....

.....
Signed: Medical Officer

FORM B

INFORMATION [*Relative, good neighbor*]

A. B of ..... informs the undersigned Medical Officer that he has good cause to suspect and believe, and does suspect and believe that CD of .....is in need of mental healthcare.

.....
Social Welfare Officer/Nurse
Signature of Informant

Taken and sworn at ..... this ..... day of ....., 2013.

Before me:

.....
Medical Officer

FORM C

MEDICAL CERTIFICATE

I, Dr ..... a duly qualified medical practitioner hereby certify that I, on the .....day of ..... at ..... in ..... LGA of ..... State personally examined Mr/Mrs/Miss ..... and I hereby certify that the said ..... is mentally ill and a proper subject for admission, and I have formed this opinion upon the following grounds, namely:

(1) Facts indicating mental disorder observed by myself as hereunder stated
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.....
.....

(2) Other facts (if any) indicating mental disorder communicated by as hereunder stated:
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(3) I have made inquiries of all persons known to me who seem likely to be able to give information as to any facts of the previous history of the said ..... likely to be of service with reference to his medical treatment. The following statement contains all such facts known to me:

Name of Patient in full
Sex and Age
Marital Status
Condition of life and previous occupation if any
Religion
Previous Place of Abode
Whether first attack. Age on first attack (if known)
When and where previously under care and treatment
Duration of existing attack. Supposed cause
Whether subject to epilepsy
Whether suicidal
Whether dangerous to others
Name in full and place of abode of nearest known relative of patient and degree of relationship.
Any other facts.

Dated this .....day of ....., 200

Signed:.....
Medical Practitioner
(*Place of abode*)

FORM D

Section 16

CERTIFICATE OF RECOVERY AND DISCHARGE

(*a*) When granted by Medical Officer

I hereby certify that ..... at present confined in this hospital has been under my care and observation for ..... months, and that I have examined him and have inquired into all necessary facts relating to his case, and I believe that he has made such progress as to be a proper person to be discharged therefrom.

.....
Signature of Medical Officer

(*b*) When granted by two Medical Practitioners

We hereby certify that we have this day personally examined .....
at present confined at ..... hospital, and after due inquiring into all necessary facts relating to his case, we believe that he has now made such progress as to be a proper person to be discharged therefrom.

....
Medical Officer I *Medical Officer II*

EXPLANATORY NOTE

The Act makes elaborate provisions for the management of Mental Health in Nigeria. The Act makes sundry provisions for the formal admission for observation and/or treatment, it makes provisions for the protection of the interest of the mentally ill from the normal population, in various personal, civil and criminal matters as well as the protection of the general public interest from any antisocial behaviuour associated with the mental disorder, especially in matters relating to criminality and recidivism.