



Compulsory Psychiatric Care

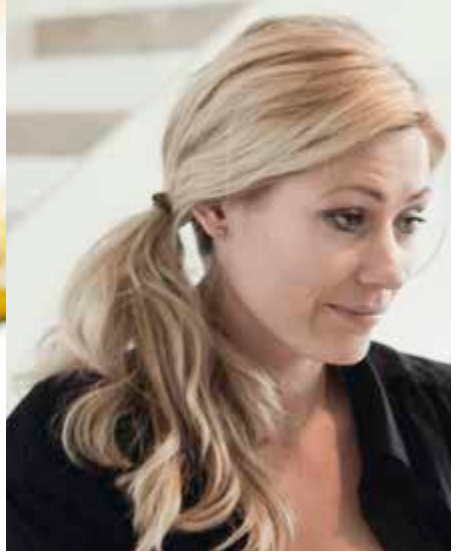
Information for those being treated under the Compulsory
Psychiatric Care Act



Nationell Samverkan för Psykiisk Hällsa



Sveriges
Kommuner
och Landsting



WHAT HAPPENS NOW?

The purpose of compulsory care is to make you better, so that you can avoid receiving care under compulsion. This brochure describes the Compulsory Mental Care Act (“LPT”) and the rights you have as a patient.

Why did I end up here?

Compulsory care is care given in a psychiatric unit against your will. There are three conditions that must be fulfilled in order for compulsory care to be given. You need to be suffering from serious mental ill health, needing care 24 hours a day and refusing to receive care voluntarily. A decision about compulsory care is made by the consultant. If you do not agree with the consultant’s decision, you can appeal the decision to the Administrative Court. Further on in the brochure, you can read about how to appeal.

Recuperation and medical treatment

The purpose of the care is to improve your ability to look after yourself. Sometimes, rest, food, recuperation and someone to talk to are all that is needed, but usually some form of medical treatment is also necessary. If you refuse to accept the medicine the doctor prescribes, it may be given against your will. This is something that should be avoided as far as possible. You are entitled to know what medicine the doctor is prescribing, the effect of the medicine and its side effects.

Compulsory measures

If you seriously obstruct the care of other patients, you may be kept in isolation. This means that you are not allowed to leave your room, or that your door may be locked. The decision is taken by a consultant, and will apply for at most eight hours. The isolation may be extended, but only after you have had the opportunity to see and talk to a consultant.

If there is a risk that you may injure yourself or others, there is a possibility of using further compulsory measures. This may mean that you are briefly held in a bed with the help of straps, so that you cannot hurt yourself or anyone else. In order for this to happen, a decision by a consultant is required. You may be strapped in for at most four hours, and there must always be personnel present. If the situation is not under control then, the strapping in may be extended, but only after you have had the opportunity to see and talk to a consultant. Another measure is a body search. The reason for this is that objects that may hurt you or someone else shall not be brought into the ward.

Compulsory measures cannot be appealed. If compulsory measures should come into question, you are entitled to ask for a post-measure interview afterwards,

at which you will have the opportunity to discuss what happened. The purpose of the interview is to try together to find ways of ensuring similar situations do not arise again.

Support person

You are entitled to your own support person. A support person is a person appointed by the Patient Board, who does not work on the ward. The support person is entitled to visit you on the ward, has a professional duty of confidentiality and can support you on personal issues. If you and your support person so wish, the appointment may be extended by four weeks after the compulsory care has ended. If you want to see a support person, please tell your contact person, so that the Patient Board can be notified.

Leave

In some cases, you may get the consultant's permission to leave the ward temporarily. The leave may be dependent on some conditions, such as taking medication. The consultant may cancel the leave if the circumstances so require. You may ask for leave at any time you are receiving care. If the consultant refuses the leave, you can appeal the decision to the Administrative Court.

You have the right to information about the state of your health and the planned treatment.

Mobile telephone, internet and email

You are usually allowed to use electronic equipment, such as mobile telephones, internet and email. The consultant may limit the access to electronic equipment if the care is made more difficult by its use. The decision can be appealed to the Administrative Court.

Making an appeal

You may appeal the compulsory care decision at any time. You make the appeal to the Administrative Court. You are entitled to a legal representative free of charge, who has the task of supporting you. Before the legal hearing, you are entitled to read the psychiatric care certificate and the medical notes written in conjunction with you being admitted. During the hearing, you or your legal representative have the opportunity to give your views on why you do not want to re-

ceive compulsive care. A specialist medical doctor, who works at another hospital will be present during the hearing. This doctor has the task of giving his/her independent view after having read your medical notes and listened to both you and the consultant. The Administrative Court then makes a decision whether the care shall continue or end. The Court will then inform you and those responsible for your care of what will apply thereafter.

Right to information

You are entitled to know the reasons why you are receiving compulsive care. You are also entitled to information about your state of health and the treatment that is planned. You are entitled to an interpreter. An interpreter can make mutual understanding easier.



GLOSSARY

Psychiatric care certificate

A psychiatric care certificate is a special doctor's certificate that is required in order for a person to be cared for in a hospital against his/her will. When an admission decision is made, the psychiatric care certificate may be no older than four days. When you arrive at the ward, you will be given an examination by a further doctor.

Admission decision

If you have a psychiatric care certificate, you may be kept in hospital in order to give a specialist psychiatric doctor the opportunity to talk to you and assess your need for care. It is this doctor who may make a decision to admit you under to the Compulsory Psychiatric Care Act (Lagen om Psykiatrisk Tvångsvård, LPT). Such an examination must be carried out within 24 hours after you have arrived at the hospital.

Contact person

A contact person is a person who works where you are being cared for, who has extra responsibility for you, and to whom you can turn. It may also be a group or a care team that fulfils this function.

Support person

A support person is a person appointed by the Patient Board, who does not work on the ward. The support person is entitled to visit you and can support you on personal issues.

Care plan

A care plan is a document that should be drawn up as early as possible after you have been admitted. The plan shall, as far as possible, be drawn up in consultation with you as a patient. Unless it is unsuitable, relatives shall also take part in the planning. The care plan describes the treatment measures and other inputs that will lead to the compulsive care no longer being needed.

Consultant

The consultant is a specialist doctor within psychiatry who works on the ward. It is the consultant who is responsible for all decisions and measures in relation to the compulsive care.

Leave

A short time away from the closed psychiatric care.

Body search

A search of the clothes a person is wearing, as well as bags, packages and other objects the person brings with him/her.

Superficial body inspection

Examination of the visible parts of the body, as well as armpits, hair and soles of the feet.

***PLEASE FEEL FREE TO CONTACT ANY NSPH
MEMBER ORGANIZATIONS***

Frisk och Fri – Riksföreningen mot ätstörningar, www.friskfri.se

Riksförbundet Attention, www.attention-riks.se

Riksförbundet Balans, www.balansriks.se

RFHL – Riksförbundet för Rättigheter, Frigörelse, Hälsa, Likabehandling, www.rfhl.se

RSMH – Riksförbundet för Social och Mental Hälsa, www.rsmh.se

RUS – Riksförbundet Ungdom för Social hälsa, www.rus-riks.se

Schizofreniförbundet – Intresseförbundet för personer med schizofreni och liknande psykos, www.schizofreniforbundet.se

SPES – Riksförbundet för SuicidPrevention och Efterlevandes stöd, www.spes.se

Svenska OCD-förbundet Ananke, www.ocdforbundet.se

Sveriges Fontänhus, www.sverigesfontanhus.se

ÅSS – Svenska ångestsyndromsällskapet, www.angest.se

FMN – Riksförbundet Föräldraföreningen mot narkotika, www.fmn.se

SHEDO – Self Harm and Eating Disorders Organisation, www.shedo.se

DO YOU HAVE ANY QUESTIONS?

The personnel are there for you as a patient. You can ask them questions and ask for help. Do you want to read more? Lagen om Psykiatrisk Tvångsvård (the Compulsory Care Act) shall always be displayed clearly visible to all patients on the ward.

You can also read more on www.1177.se/Regler-och-rattigheter/Psykiatrisk-tvangsvard/