

Certificate supporting an application for assessment

To: The Director of Area Mental Health Services, at:	<i>Location</i>
Name of proposed patient:	<i>Full name</i>
Proposed patient's date of birth:	<i>Date of birth</i>
Of:	<i>Address</i>

I believe the person named above to be mentally disordered and apply to the Director of Area Mental Health Services to have that person assessed. I base my belief on the following grounds:

<i>continue on a separate sheet if necessary...</i>

I am the applicant named:	<i>Full name of applicant</i>
of:	<i>Address of applicant</i>
My relationship to or association with the proposed patient is:	

I declare that I have attained the age of 18 years and have seen the proposed patient in person within the last 3 days.

<i>Signature of applicant</i>	/ / <i>Date of application</i>
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This application is accompanied by a certificate given by a mental health practitioner¹(see reverse) who has examined the proposed patient within the last 3 days.

Mental Health (Compulsory Assessment and Treatment) Act 1992.

Section 2

The statutory definition of mental disorder is:

"Mental disorder, in relation to any person, means an abnormal state of mind (whether of a continuous or an intermittent nature), characterised by delusions, or by disorders of mood or perception or volition or cognition, of such a degree that it –

- (a) Poses a serious danger to the health or safety of that person or of others; or
- (b) Seriously diminishes the capacity of that person to take care of himself or herself; and "mentally disordered", in relation to any such person, has a corresponding meaning.

Section 4.

General rules relating to liability to assessment or treatment

The procedures prescribed by Parts I and II of this Act shall not be invoked in respect of any person by reason only of -

- (a) That person's political, religious, or cultural beliefs; or
- (b) That person's sexual preferences; or
- (c) That person's criminal or delinquent behaviour; or
- (d) Substance abuse; or
- (e) Intellectual handicap

During the **COVID-19 temporary response period** as defined in the COVID-19 Response (Further Management Measures) Legislation Act 2020, the following persons are mental health practitioners and are able to issue certificates under section 8B of the Mental Health (Compulsory Assessment and Treatment) Act 1992:

- (a) a medical practitioner; or
- (b) a nurse practitioner; or
- (c) a registered nurse practising in mental health

'registered nurse practising in mental health' means a health practitioner who—

- (a) is, or is deemed to be, registered with the Nursing Council of New Zealand continued by section 114(1)(a) of the Health Practitioners Competence Assurance Act 2003 as a practitioner of the profession of nursing and whose scope of practice includes the assessment of the presence of mental disorder as defined under this Act; and
- (b) holds a current practising certificate.

The COVID-19 temporary response period is until **31 October 2021**, unless an earlier date is set by Order in Council on the recommendation of the Minister of Health. For further details, see Schedule 11 of the COVID-19 Response (Further Management Measures) Legislation Act 2020.