



**CHIEF PSYCHIATRIST
OF
WESTERN AUSTRALIA**

**WA MENTAL HEALTH
ACT 2014**

SECTIONS: 223

Please use ID label or block print

FAMILY NAME

UMRN

GIVEN NAMES

CMHI

BIRTHDATE

GENDER

ADDRESS

FORM 11G – RECORD OF POST-SECLUSION EXAMINATION

Date and time person released from seclusion:

Date: DD/MM/YY Time: HH:MM

Date and time of examination by medical practitioner:

Date: DD/MM/YY Time: HH:MM

(Must be within 6 hours of the person being released from seclusion)

Record of results of examination:

(Include record of any complication or deterioration in the person's mental or physical condition that is a result of, or may be the result of the person being secluded)

Name of medical practitioner conducting examination: _____

Qualifications of medical practitioner: _____

Signature of medical practitioner: _____

FORM 11G – RECORD OF POST-SECLUSION EXAMINATION

Notes: Form 11G – Record of post-seclusion examination

When to use this form:

Whenever a person is released from seclusion the person in charge of the ward must ensure:

- that the person is examined by a medical practitioner within 6 hours after the time when the person is released from the seclusion; or
- if the person is to be released or discharged, or wants to leave the hospital against medical advice, the person is to be offered an examination by a medical practitioner before the person is released, discharged or leaves (s223(2)).

A medical practitioner who examines a person must record in this form, the results of the examination, including any complication of or deterioration in the person's mental or physical condition that is a result of, or may be the result of, the person being secluded (s223(3)).

Checklist of *Mental Health Act 2014* requirements related to this form:

Notes

- ☐ Give the person a copy of this form as soon as practicable.
- ☐ File this form on the person's medical record.
- ☐ ☒ Email a copy of this form to the Chief Psychiatrist at monitoring@ocp.wa.gov.au as soon as practicable and file a record of having done this.
- ☐ ☒ If the person is a mentally impaired accused, email a copy of this form to the Mentally Impaired Accused Review Board at prisonersreviewboard@justice.wa.gov.au and file a record of having done this.