

The Mental Health Services Act



being

Chapter M-13.1 of the *Statutes of Saskatchewan, 1984-85-86* (effective April 1, 1986) as amended by the *Statutes of Saskatchewan*, 1989-90, c.54; 1992, c.A-24.1; 1993, c.59; 1996, c.9 and 17; 1997, c.12; 2002, c.R-8.2; and 2004, c.L-16.1.

NOTE:

This consolidation is not official. Amendments have been incorporated for convenience of reference and the original statutes and regulations should be consulted for all purposes of interpretation and application of the law. In order to preserve the integrity of the original statutes and regulations, errors that may have appeared are reproduced in this consolidation.

CHAPTER M-13.1
An Act respecting Mental Health Services

PART I
Short Title and Interpretation

Short title

1 This Act may be cited as *The Mental Health Services Act*.

Interpretation

2 In this Act:

- (a) **“approved home”** means any building, premises or place in respect of which there is a subsisting certificate issued pursuant to section 37 of this Act or pursuant to *The Mental Health Act*;
- (b) **“attending physician”** means:
 - (i) in relation to an in-patient, the physician who has responsibility for the care and treatment of the patient;
 - (ii) in relation to a person who is the subject of a community treatment order, the psychiatrist who issued the community treatment order or another psychiatrist who is responsible for the care and treatment of the person;
- (c) **“branch”** means Mental Health Services Branch of the department;
- (d) **“chief psychiatrist”** means a psychiatrist designated pursuant to section 9;
- (d.1) **“community treatment order”** means a community treatment order issued pursuant to section 24.3;
- (e) **“department”** means the department over which the minister presides;
- (f) **“director”** means the person appointed pursuant to section 6;
- (g) **“experimental treatment”** means any treatment that poses a significant risk of harm to the patient, other than one that is:
 - (i) commonly accepted for treatment of the mental disorder involved or supported by widely accepted scientific studies; and
 - (ii) provided by a qualified health professional;
- (h) **“facility”** means:
 - (i) a mental health centre;
 - (ii) a psychiatric ward;
 - (iii) a mental health clinic; or

c. M-13.1

MENTAL HEALTH SERVICES

- (iv) any other building or portion of a building for the care, treatment or training of persons with mental disorders that is designated as a facility;
- (i) **“in-patient”** means a patient to whom a bed is allocated for overnight stay in an in-patient facility;
- (j) **“in-patient facility”** means a facility which provides services to in-patients;
- (k) **“involuntary patient”** means a patient who is admitted to and detained in an in-patient facility pursuant to section 23, 24 or 24.1;
- (l) **“judge”** means a judge of Her Majesty’s Court of Queen’s Bench for Saskatchewan;
- (m) **“mental disorder”** means a disorder of thought, perception, feelings or behaviour that seriously impairs a person’s judgment, capacity to recognize reality, ability to associate with others or ability to meet the ordinary demands of life, in respect of which treatment is advisable;
- (n) **“mental health centre”** means a place where services are provided to in-patients and out-patients and that is designated by the minister as a mental health centre;
- (o) **“mental health clinic”** means a place where services are provided to out-patients and not to in-patients and that is designated by the minister as a mental health clinic;
- (p) **“minister”** means the member of the Executive Council to whom for the time being the administration of this Act is assigned;
- (q) **“nearest relative”** means the person first described in this clause who is mentally competent and available:
- (i) the spouse;
 - (ii) a son or daughter who has attained the age of majority;
 - (iii) a parent or guardian;
 - (iv) a brother or sister who has attained the age of majority;
 - (v) any other of the next-of-kin who has attained the age of majority;
- (r) **“officer in charge”** means:
- (i) in relation to a facility, the person designated pursuant to section 8; or
 - (ii) where no person is designated pursuant to section 8, the regional director for the region in which the facility is located;
- (s) **“official representative”** means an official representative appointed pursuant to section 10;

- (t) **“out-patient”** means a patient who is not an in-patient;
- (u) **“patient”** means a person receiving:
- (i) diagnostic services for the purpose of determining the existence or nature of; or
 - (ii) care or treatment for;
- a mental disorder pursuant to this Act;
- (v) **“physician”** means a duly qualified medical practitioner;
- (w) **“prescribed”** means prescribed by regulation by the Lieutenant Governor in Council pursuant to this Act or *The Mental Health Act*;
- (x) **“psychiatric ward”** means a ward in a hospital approved pursuant to *The Hospital Standards Act* or any former *Hospital Standards Act* and designated by the minister as a psychiatric ward;
- (y) **“psychiatrist”** means a physician:
- (i) who holds a specialist’s certificate in psychiatry issued by the Royal College of Physicians and Surgeons of Canada; or
 - (ii) whose combination of training and experience in psychiatry is satisfactory to the minister and who has been approved by the minister as a psychiatrist for the purposes of this Act;
- (z) **“psychosurgery”** means any procedure that by direct access to the brain removes, destroys or interrupts the normal connections of the brain for the primary purpose of treating a mental disorder or involves the implantation of electrodes, but does not include neurosurgical procedures designed to treat reliably diagnosed organic brain conditions or epilepsy;
- (aa) **“region”** means a mental health region established in the regulations;
- (bb) **“regional director”** means a regional director designated pursuant to section 7;
- (cc) **“review panel”** means a review panel appointed pursuant to section 32.

1984-85-86, c.M-13.1, s.2; 1989-90, c.54, s.7;
1993, c.59 s.3; 1996, c.17, s.3.

PART II Administration

Powers of minister

3 Unless specifically dealt with in another Act, the minister may do any thing pursuant to this Act that he considers advisable for preventing circumstances that lead to mental disorder and distress and for promoting and restoring the mental health and well-being of the people of Saskatchewan and, without limiting the generality of the foregoing, the minister may:

- (a) make available mental health services including psychiatric in-patient services, clinical services in the community, residential services, rehabilitation services, consultation, public education, research and prevention in various centres throughout Saskatchewan to the end that those services may be available to all persons requiring them in Saskatchewan;
- (b) enter into agreements with persons whose objectives include the promotion, preservation or restoration of mental health to obtain prescribed mental health services in return for fees paid to those persons;
- (c) provide loans, grants or other funding to assist persons whose objectives include the promotion, preservation or restoration of mental health;
- (d) conduct research for the purpose of ascertaining more effective methods of providing mental health services or carrying out the purposes of this Act;
- (e) operate facilities, alone or in conjunction with persons whose objectives include the preservation or restoration of mental health;
- (f) in the operation of mental health programs, employ psychiatrists, psychiatric nurses, psychologists, social workers, other therapists and any other personnel that he considers necessary, on any terms and conditions that he considers appropriate;
- (g) appoint consultants and committees and authorize them to conduct inquiries and make recommendations to him concerning the provision of mental health services.

1984-85-86, c.M-13.1, s.3.

Facilities

4(1) The minister may designate mental health centres, mental health clinics, psychiatric wards and any other buildings or parts of buildings for the purpose of providing mental health services.

(2) A facility may not change its name or be given a name without the prior written approval of the minister.

1984-85-86, c.M-13.1, s.4; 1993, c.59, s.4.

Regions

5 The Lieutenant Governor in Council may by regulation establish mental health regions to be served by facilities in various centres throughout Saskatchewan.

1984-85-86, c.M-13.1, s.5.

Director of mental health services

6(1) The minister shall appoint an employee of the department as director of mental health services and prescribe his or her duties and responsibilities.

(2) The minister may authorize the director to delegate to other officers of the department any power given to the director by this Act and the regulations.

1993, c.59, s.5.

Regional directors

7(1) The minister shall designate a regional director for each region.

(2) The regional director may delegate to any person any power given to the regional director by this Act and the regulations.

1993, c.59, s.6.

Officer in charge

8(1) The regional director may designate a person for each facility that is located in the region to be the person responsible for the administration of this Act in the facility.

(2) Where the regional director does not designate a person pursuant to subsection (1), the regional director is responsible for the administration of this Act in the region.

1993, c.59, s.7.

Chief psychiatrist

9 The minister shall designate a psychiatrist for each mental health centre, psychiatric ward and mental health clinic to be responsible for clinical services in the facility.

1984-85-86, c.M-13.1, s.9.

Official representative

10 The minister shall appoint one or more official representatives for each region to assist patients in understanding their rights and obligations pursuant to this Act.

1984-85-86, c.M-13.1, s.10.

PART III Eligibility for Services

Eligibility

11 Subject to section 13, any person who is a beneficiary pursuant to:

(a) **Repealed.** 1997, c.12, s.7.

c. M-13.1

MENTAL HEALTH SERVICES

(b) *The Saskatchewan Medical Care Insurance Act*;

is eligible to receive services provided by the minister pursuant to this Act at the expense of the Government of Saskatchewan.

1984-85-86, c.M-13.1, s.11; 1997, c.12, s.7.

Services to persons who are not beneficiaries

12 The minister may provide services to persons who are not beneficiaries pursuant to section 11, and may enter into any agreements that he considers appropriate with any person with respect to providing services pursuant to this Act to persons who are not beneficiaries.

1984-85-86, c.M-13.1, s.12.

Regulations about eligibility

13 The Lieutenant Governor in Council may make regulations:

- (a) classifying services that are provided to beneficiaries and other persons by the minister pursuant to this Act;
- (b) classifying beneficiaries and other persons according to the services that they receive from the minister pursuant to this Act;
- (c) fixing the amounts that the minister may charge a beneficiary or other person or class of beneficiaries or other persons for each service or class of service provided by him pursuant to this Act.

1984-85-86, c.M-13.1, s.13.

PART IV

General Rights and Obligations**Preservation of rights**

14 Except as provided in this Act, no person who:

- (a) is receiving or has received mental health services; or
- (b) is or has been named in a certificate, warrant or order issued pursuant to section 18, 19, 21, 22, 23, 24, 24.1 or 24.3 of this Act or in any similar certificate, warrant or order issued pursuant to *The Mental Health Act* or any former Act respecting mental health;

shall be deprived of any right or privilege enjoyed by other persons solely by reason of receiving or having received mental health services or having been named in the certificate, warrant or order.

1984-85-86, c.M-13.1, s.14; 1993, c.59, s.8.

Restrictions as to persons giving certificates

15 Except as permitted by the regulations or by the minister, no certificate or form required by this Act or the regulations with respect to any person shall be made, issued, given, completed or signed by a physician who is by blood or marriage closely related to or connected with:

- (a) that person; or
- (b) any physician who makes, issues, gives, completes or signs a certificate or form with respect to that person.

1984-85-86, c.M-13.1, s.15.

Right to be informed

16(1) Every person who is apprehended or detained pursuant to section 18, 19, 20, 21, 22, 23, 24, 24.1 or 24.3:

- (a) shall be informed promptly of the reasons for his apprehension or detention, as the case may be; and
- (b) is entitled on his own request to receive a copy of the certificate, warrant or order pursuant to which he has been apprehended or is detained, as the case may be, as soon as is reasonably practicable.

(2) Where a person is apprehended or detained pursuant to section 18, 19, 21, 22, 23, 24, 24.1 or 24.3 or is transferred pursuant to section 28, an official representative for the region shall be provided with a copy of the certificate, warrant or order pursuant to which the person is or was apprehended, detained or transferred, as the case may be, as soon as is reasonably practicable.

1984-85-86, c.M-13.1, s.16; 1993, c.59, s.9.

PART V**Assessment, Treatment, Admission and Discharge****Voluntary request for services**

17 Subject to the regulations and to the availability of services that the minister provides, a person may, on his own request:

- (a) receive assessment and treatment services as an out-patient;
- (b) with the advice and on the arrangements of a physician with admitting privileges to an in-patient facility, be admitted to an in-patient facility as an in-patient; or
- (c) receive other services available pursuant to this Act.

1984-85-86, c.M-13.1, s.17.

c. M-13.1**MENTAL HEALTH SERVICES****Involuntary out-patient examination**

18(1) Subject to the regulations, any person who:

- (a) in the opinion of an examining physician is suffering from a mental disorder and requires a psychiatric examination to ascertain whether he should be admitted to an in-patient facility pursuant to section 24; and
- (b) refuses to submit to the examination mentioned in clause (a);

may, after:

- (c) arrangements have been made with a physician who has admitting privileges to an in-patient facility; and
- (d) the certificate of the examining physician is issued in accordance with this section;

be conveyed to a place where he may be examined as an out-patient by the physician mentioned in clause (c).

(2) The certificate of a physician in the prescribed form is sufficient authority to any person to apprehend the person who is the subject of the certificate and convey him immediately to the place where the examination is to be conducted by the physician mentioned in clause (1)(c).

(3) Every certificate issued pursuant to subsection (1) is required to:

- (a) state that the physician has personally examined the person who is the subject of the certificate and, after due inquiry into the necessary facts relating to the case of the person, has formed the opinion that the person is suffering from a mental disorder and requires a psychiatric examination to ascertain whether he should be admitted to an in-patient facility pursuant to section 24;
- (b) state the facts on which the physician has formed his opinion of the mental disorder;
- (c) show the date on which the examination was made; and
- (d) be signed in the presence of one subscribing witness.

(4) No person shall be conveyed for a psychiatric examination more than seven days after the date on which the examination for the purposes of subsection (1) was made.

(5) A psychiatric examination pursuant to this section shall be conducted as soon as is reasonably practicable, and in all cases within 24 hours, after the person arrives at the place where he is to be examined.

1984-85-86, c.M-13.1, s.18.

Judge's warrant

19(1) A person who on reasonable and probable grounds believes that another person who refuses to submit to a medical examination:

- (a) is suffering from a mental disorder; and

(b) is in need of examination to determine whether he should be admitted to an in-patient facility pursuant to section 24;

may lay an information before a Judge of the Provincial Court of Saskatchewan in the prescribed form to that effect.

(2) If on inquiry the Judge of the Provincial Court of Saskatchewan is satisfied that the person named in the information is in need of examination to determine whether he should be admitted to an in-patient facility pursuant to section 24, that judge may, after making arrangements with a physician who has admitting privileges to an in-patient facility, issue a warrant in the prescribed form to apprehend the person named in the warrant and cause him to be taken to a place where he may be examined as an out-patient by that physician.

(3) No person shall falsely swear or affirm an information pursuant to sub-section (1).

(4) A warrant issued pursuant to subsection (2) is to be accompanied by written reasons for its issuance.

(5) A copy of a warrant issued pursuant to subsection (2) and the written reasons are to be provided to the person who is apprehended pursuant to the warrant and to the physician who examines him.

(6) If a relative or friend of a person who is to be apprehended pursuant to this section so requests, the warrant may be directed to and executed by that relative or friend and, otherwise, it may be directed to and executed by a constable or peace officer.

(7) The person who is apprehended pursuant to this section shall be examined by a physician as soon as is reasonably practicable and in all cases within 24 hours of his apprehension.

(8) No person shall be apprehended pursuant to a warrant issued pursuant to subsection (2) more than seven days after the date on which the warrant was issued.

1984-85-86, c.M-13.1, s.19.

Powers of constables in certain cases

20(1) Where a constable or peace officer has reasonable and probable grounds to believe that a person in a public place is:

- (a) suffering from a mental disorder; and
- (b) causing a disturbance by acting in a manner that would normally be considered disorderly;

he may apprehend the person without a warrant and convey him as soon as practicable to a place where he may be examined by a physician.

(2) A person apprehended pursuant to subsection (1) shall be examined by a physician as soon as practicable and in all cases within 24 hours of his apprehension.

1984-85-86, c.M-13.1, s.20.

Patients brought into Saskatchewan

21(1) Subject to the regulations, where the director has reason to believe that a person who is being detained in a hospital outside Saskatchewan by reason of having a mental disorder should be brought into Saskatchewan, the director may, by order in the prescribed form, authorize that the person be taken into custody, conveyed to an in-patient facility and examined, as an out-patient, by a physician who has admitting privileges to the facility.

(2) No person shall be conveyed to a facility pursuant to subsection (1) more than seven days after the date that the order mentioned in subsection (1) was made.

(3) An examination mentioned in subsection (1) is to be conducted as soon as is reasonably practicable and in all cases within 24 hours of the person's being brought into Saskatchewan.

1984-85-86, c.M-13.1, s.21.

Treatment of person charged with an offence

22(1) In this section, “**judge**” includes a Judge of the Provincial Court of Saskatchewan.

(2) Where a person who has been charged with an offence and who is in custody requests an examination in order to determine whether he may be treated for a mental disorder, the judge may, after making the necessary arrangements with a psychiatrist or any other qualified mental health professional who may be designated by the regional director, order that the person be conveyed to a place where he may be examined by that psychiatrist or other professional.

(3) Where a judge considers that a person who has been charged with an offence is suffering from a mental disorder and is in need of an examination to determine whether he should be admitted to an in-patient facility pursuant to section 24, he may, after making arrangements with a physician who has admitting privileges to an in-patient facility, order that the person be conveyed to a place where he may be examined as an out-patient by that physician.

(4) Where an order is made pursuant to subsection (2) or (3), the judge may order that the person to be examined shall be accompanied by a police officer who shall be responsible for his custody until the examination has been completed.

(5) The results of an examination ordered pursuant to subsection (2) or (3) are to be communicated in writing to the judge.

(6) Where the judge, on the basis of the results of the examination conducted pursuant to this section, is satisfied that:

- (a) the person examined requires treatment for a mental disorder;
- (b) a psychiatrist or other qualified mental health professional designated by the regional director is prepared to provide treatment to the person; and
- (c) the person consents to receiving treatment;

the person may receive treatment with the approval of the court.

(7) Where two physicians at least one of whom is a psychiatrist certify that a person who is examined pursuant to this section meets the criteria set out in clause 24(2)(a), that person may, subject to any further order of the court, be detained with the approval of the court as an in-patient pursuant to section 24 and is subject to all the provisions of this Act respecting patients detained pursuant to section 24.

1984-85-86, c.M-13.1, s.22.

Admission on order or warrant

23 Subject to the regulations, a person who is suffering from a mental disorder may be admitted to an in-patient facility and detained there:

- (a) under an order pursuant to Part XX.1 of the *Criminal Code* (Canada);
- (b) on an order of the Commissioner of the Correctional Service of Canada in the case of transfer of the person from a penitentiary.
- (c) **Repealed.** 1993, c.59, s.10.

1984-85-86, c.M-13.1, s.23; 1993, c.59, s.10.

Psychiatric review

23.1(1) Where a person has been detained under the provisions of the *Criminal Code* (Canada) as unfit to stand trial, not criminally responsible by reason of mental disorder or acquitted on account of insanity and the person's detention is about to expire, the director may order that the person submit to an examination by a physician with admitting privileges to an in-patient facility to ascertain whether that person should be detained in an in-patient facility pursuant to section 24.

(2) A person to whom an order is directed pursuant to subsection (1) shall allow himself or herself to be examined in accordance with the order.

1993, c.59, s.11.

Admission on medical certificates

24(1) In this section "**physician**" means a physician who has admitting privileges to an in-patient facility.

(2) Every certificate issued for the purposes of this section is to be in the prescribed form and is to:

- (a) state that the physician has examined the person named in the certificate within the immediately preceding 72 hours and that, on the basis of the examination and any other pertinent facts regarding the person or the person's condition that have been communicated to the physician, he has probable cause to believe that:
 - (i) the person is suffering from a mental disorder as a result of which he is in need of treatment or care and supervision which can be provided only in an in-patient facility;

c. M-13.1**MENTAL HEALTH SERVICES**

- (ii) as a result of the mental disorder the person is unable to fully understand and to make an informed decision regarding his need for treatment or care and supervision; and
 - (iii) as a result of the mental disorder, the person is likely to cause harm to himself or to others or to suffer substantial mental or physical deterioration if he is not detained in an in-patient facility;
 - (b) state the facts on which the physician has formed his opinion that the person meets the criteria set out in clause (a);
 - (c) show the date on which the examination was made; and
 - (d) be signed in the presence of one subscribing witness.
- (3) On the issuance of the certificates of two physicians at least one of whom is a psychiatrist:
- (a) a person who is not an in-patient in an in-patient facility may be apprehended, conveyed and admitted to an in-patient facility and detained there until the end of the 21st day following the day that he is admitted;
 - (b) a person who is an in-patient in an in-patient facility may be detained there until the end of the 21st day following the date of the issuance of the first of the two certificates.
- (4) Notwithstanding subsection (3), where it is not reasonably practicable to obtain the certificates of two physicians at least one of whom is a psychiatrist, on the issuance of the certificate of one physician:
- (a) a person who is not an in-patient in an in-patient facility may be apprehended, conveyed and admitted to an in-patient facility and detained there until the end of the third day following the day that he is admitted;
 - (b) a person who is an in-patient in an in-patient facility may be detained there until the end of the third day following the date of the issuance of the certificate.
- (5) Where a person is detained in an in-patient facility pursuant to subsection (4), a second opinion about his condition is to be obtained as soon as practicable, where the physician who signed the certificate on the basis of which the person is detained in the facility is:
- (a) a psychiatrist, from another physician; or
 - (b) not a psychiatrist, from a psychiatrist.
- (6) Where:
- (a) a person is detained pursuant to subsection (4); and
 - (b) a certificate is issued by the physician who examined the patient pursuant to subsection (5);
- the person may be further detained until the end of the 21st day following the date of the issuance of the certificate pursuant to subsection (4).

- (7) A person detained in an in-patient facility pursuant to this section may be detained for successive periods of 21 days on the certificates, signed before the end of each 21-day period, of two physicians at least one of whom is a psychiatrist.
- (8) No person shall be admitted to an in-patient facility:
- (a) pursuant to clause (3)(a) more than seven days after the date of the first of the two examinations on which the certificates are based;
 - (b) pursuant to clause (4)(a) more than seven days after the date of the examination on which the certificate is based.
- (9) Where an in-patient who has been detained pursuant to this section indicates a desire to remain as an in-patient pursuant to section 17, the attending physician may issue an order in the prescribed form revoking any certificate then in effect, and in that event he may remain in the facility pursuant to section 17.

1984-85-86, c.M-13.1, s.24; 1993, c.59, s.12.

Long term detention order

24.1(1) The officer in charge of a facility in which a person is being detained pursuant to section 23, 24 or this section may apply to Her Majesty's Court of Queen's Bench for Saskatchewan for an order for detention of that person for a period not to exceed one year where:

- (a) the person is suffering from a mental disorder as a result of which he or she is in need of treatment or care and supervision which can be provided only in an in-patient facility;
 - (b) as a result of the mental disorder the person is unable to fully understand and to make an informed decision regarding his or her need for treatment or care and supervision;
 - (c) as a result of the person's mental disorder, he or she is likely to cause bodily harm to himself or herself, or to others;
 - (d) the person has been detained pursuant to section 23, 24 or this section for 60 or more consecutive days immediately prior to the date of the application; and
 - (e) the person is suffering from a severely disabling continuing mental disorder that is likely to persist for a period of longer than 21 days, notwithstanding that treatment is being provided.
- (2) An application pursuant to subsection (1) is to be by notice of motion, and copies of the notice of motion are to be served on:
- (a) the person who is the subject of the application;
 - (b) the person's nearest relative; and
 - (c) an official representative for the region.
- (3) Where a judge of the court finds, following a hearing, that the person meets all of the criteria listed in subsection (1), the judge may make an order for the detention of the person for a period of up to one year for the purposes of treatment or care and supervision.

c. M-13.1

MENTAL HEALTH SERVICES

- (4) Detention orders made pursuant to subsection (3) are subject to review by the court.
- (5) An application for a review of a detention order may be made by:
- (a) the person who is the subject of the application;
 - (b) the person's nearest relative;
 - (c) the officer in charge of the facility in which the person is detained;
 - (d) an official representative for the region;
 - (e) any other person with a sufficient interest.
- (6) An application for a review of an order issued pursuant to subsection (3) is to be made by notice of motion and is to be served on the persons who were parties to the application for the detention order.
- (7) On an application to review a detention order issued pursuant to subsection (3), the court may:
- (a) affirm, vary or rescind the detention order;
 - (b) make any order as to costs.
- (8) Where an order issued pursuant to subsection (3) expires or is rescinded, the attending physician shall, in writing and in the prescribed form, notify the patient, the patient's nearest relative and an official representative for the region that the order is no longer in force.
- (9) The practice and procedure of Her Majesty's Court of Queen's Bench for Saskatchewan on an application in chambers apply to applications pursuant to this section, with any necessary modification.

1993, c.59, s.13.

Treatment in community

24.2(1) For the purposes of sections 24.3 and 24.7 **"in the community"** means outside of an in-patient facility.

(2) A psychiatrist may issue a community treatment order respecting a person where the criteria in clause 24.3(1)(a) are present.

1993, c.59, s.13.

Community treatment order**24.3(1)** A community treatment order must:

- (a) state that the psychiatrist has examined the person named in the community treatment order within the immediately preceding 72 hours and that, on the basis of the examination and any other pertinent facts regarding the person or the person's condition that have been communicated to the psychiatrist, the psychiatrist has probable cause to believe that:
 - (i) the person is suffering from a mental disorder for which he or she is in need of treatment or care and supervision in the community and that the treatment and care can be provided in the community;
 - (ii) during the immediately preceding two year period, the person:
 - (A) has been detained in an in-patient facility for a total of 60 days or longer;
 - (B) has been detained in an in-patient facility on three or more separate occasions; or
 - (C) has previously been the subject of a community treatment order;
 - (iii) if the person does not receive treatment or care and supervision while residing in the community, the person is likely to cause harm to himself or herself or to others, or to suffer substantial mental or physical deterioration, as a result of the mental disorder;
 - (iv) the services that the person requires in order to reside in the community so that the person will not be likely to cause harm to himself or herself or to others, or to suffer substantial mental or physical deterioration:
 - (A) exist in the community;
 - (B) are available to the person; and
 - (C) will be provided to the person;
 - (v) as a result of the mental disorder, the person is unable to fully understand and to make an informed decision regarding his or her need for treatment or care and supervision; and
 - (vi) the person is capable of complying with the requirements for treatment or care and supervision contained in the treatment order;
- (b) state the facts on which the psychiatrist has formed his or her opinion that the person meets the criteria set out in clause (a);
- (c) describe the services that will be provided to the person and the treatment that is recommended for the person;

c. M-13.1**MENTAL HEALTH SERVICES**

- (d) state that the person is to submit to the medical treatment that is prescribed by the attending physician and is to attend appointments with the attending physician or with the responsible individuals identified pursuant to clause (e) in the places as scheduled, from time to time, consistent with good medical practice;
 - (e) identify the names of the persons authorized by the regional director who will ensure that the person who is the subject of the community treatment order will receive the services that he or she requires in order to be able to reside in the community;
 - (f) show the date on which the examination was made;
 - (g) be signed by the examining psychiatrist in the presence of one subscribing witness; and
 - (h) be in the prescribed form.
- (2) Subsections 25(2) to (5) apply, with any necessary modification, to the medical treatment that a person is required to submit to pursuant to a community treatment order.
- (3) Where a community treatment order has been validated, the attending physician shall provide a copy of it to:
- (a) the patient;
 - (b) his or her nearest relative; and
 - (c) an official representative for the region.
- (4) Where a community treatment order has been issued by a psychiatrist and the person named in that order refuses to submit to further examination, the psychiatrist who issued the order may order the person to submit to:
- (a) an examination by a second psychiatrist; or
 - (b) an examination by a physician who has been designated pursuant to section 24.31 and a further examination by a second psychiatrist.
- (5) Where a person mentioned in subsection (4) refuses to be examined pursuant to either clause (4)(a) or (4)(b), that person may be apprehended and conveyed to a place where the examination is to occur and be examined for the purposes of validating or extending a community treatment order.

1993, c.59, s.13; 1996, c.17, s.4.

Second physician – designation

24.31 Where no psychiatrist is available in the region to issue a certificate pursuant to section 24.4, a regional director serving the region may designate a physician to conduct an examination for the purposes of section 24.4.

1996, c.17, s.5; 2002, c.R-8.2, s.85.

Certificate in support of a community treatment order

24.4(1) A certificate in support of a community treatment order is to be in the prescribed form and is to state that a physician who is authorized in accordance with subsection (2):

- (a) has examined the person who is the subject of the order within the preceding 72 hours;
 - (b) has probable cause to believe that the criteria in clause 24.3(1)(a) are met;
 - (c) has probable cause to believe that the requirements of clauses 24.3(1)(b), (f) and (g) have been satisfied; and
 - (d) concurs with the treatment that the person is to follow and the services that will be provided to the person as set out in the community treatment order.
- (2) A certificate in support of a community treatment order that is issued pursuant to subsection (1) is to be written by:
- (a) a psychiatrist other than the psychiatrist who issued the community treatment order; or
 - (b) where no psychiatrist other than the psychiatrist who issued the community treatment order is available in a region, a physician who has been designated pursuant to section 24.31.
- (3) A certificate issued pursuant to subsection (1) validates the community treatment order that it supports.

1996, c.17, s.6; 2002, c.R-8.2, s.85.

Validation, expiration and revocation

24.5(1) Every community treatment order that has been validated by a certificate in support of the community treatment order issued pursuant to section 24.4 by a psychiatrist is valid for three months from the date of the community treatment order or for the period specified in the community treatment order, whichever is the lesser.

(1.1) Subject to subsection (1.2), every community treatment order that has been validated by a certificate in support of the community treatment order issued pursuant to section 24.4 by a physician designated pursuant to section 24.31 is valid for 21 days from the date of the community treatment order or for the period specified in the community treatment order, whichever is the lesser.

(1.2) If, during the period of validity of a community treatment order supported by a physician designated pursuant to section 24.31, a further certificate in support of the community treatment order is issued by a second psychiatrist, the community treatment order is valid for three months from the date of the community treatment order or for the period specified in the community treatment order, whichever is the lesser.

c. M-13.1**MENTAL HEALTH SERVICES**

(2) Where a community treatment order that has been issued pursuant to section 24.3 has expired and has not been renewed, the attending physician shall, in writing, and in the prescribed form, inform the patient, his or her nearest relative and the official representative for the region that the community treatment order is no longer in effect.

(3) Where the attending physician is of the opinion that a person who has been the subject of a community treatment order validated pursuant to section 24.4 no longer meets the criteria prescribed in clause 24.3(1)(a), the attending physician shall:

- (a) issue an order in the prescribed form revoking any community treatment order then in effect;
- (b) advise the person that he or she is no longer subject to the conditions of any community treatment order validated pursuant to section 24.4; and
- (c) provide a copy of the order issued pursuant to clause (a) to:
 - (i) the patient;
 - (ii) his or her nearest relative; and
 - (iii) an official representative for the region.

1993, c.59, s.13; 1996, c.17, s.7.

Compliance

24.6(1) Where a person who is the subject of a community treatment order fails to comply with the community treatment order and refuses to submit to a psychiatric examination to ascertain whether or not he or she should be admitted to an in-patient facility pursuant to section 24, the attending physician may order that the person be apprehended and immediately conveyed to a place where the attending physician may examine the person.

(2) An order issued pursuant to subsection (1):

- (a) is to be in the prescribed form; and
- (b) is sufficient authority for any peace officer or other person named or described in the order to apprehend the person who is the subject of the order and immediately convey that person to a place where the psychiatrist may examine the person.

1993, c.59, s.13.

Duty to provide care and treatment

24.7 Where a community treatment order has been validated pursuant to section 24.4, the attending physician shall endeavour, with all resources reasonably available in the community, to provide the person who is the subject of the order with services so that the compulsory treatment or care and supervision of the person will no longer be required.

1993, c.59, s.13.

Authority respecting diagnostic and treatment services

25(1) Except in a case of emergency, where a patient is in an in-patient facility pursuant to section 17, no diagnostic or treatment services or procedures are to be carried out on the patient except with his consent or, where he is not competent to consent, with the consent of his nearest relative.

(2) Subject to the regulations and to subsections (3) to (5), the attending physician may perform or prescribe any diagnostic procedures he considers necessary to determine the existence or nature of a mental disorder and administer or prescribe any medication or other treatment that is consistent with good medical practice and that he considers necessary to treat the mental disorder, to a patient who is detained pursuant to section 24 or 24.1 without that patient's consent.

(3) In the course of on-going diagnosis or treatment, to the extent that it is feasible given the patient's medical condition, the attending physician shall consult with the patient, explain or cause to be explained to the patient the purpose, nature and effect of proposed diagnosis or treatment and give consideration to the views the patient expresses concerning the patient's choice of therapists, the proposed diagnosis or treatment and any alternatives and the manner in which diagnoses or treatments may be provided.

(4) No physician or other person shall administer any treatment that is designated pursuant to clause 43(g) to any involuntary patient, except in accordance with special procedures prescribed for that treatment.

(5) In no case shall a physician or any other person administer psychosurgery or experimental treatment to an involuntary patient.

1984-85-86, c.M-13.1, s.25; 1993, c.59, s.14.

Person other than nearest relative

26(1) A patient who desires to have a person other than his nearest relative authorized to consent on his behalf pursuant to subsection 25(1) may apply to a judge for an order appointing another person to act instead of the nearest relative for the purposes of that subsection.

(2) Where another person is appointed pursuant to subsection (1), the nearest relative is no longer authorized to consent on behalf of the patient.

(3) An application pursuant to this section may be made by notice of motion.

1984-85-86, c.M-13.1, s.26.

Duty to provide care and treatment

27 Subject to section 25, where a person is detained in an in-patient facility, the attending physician shall endeavor with all resources reasonably available in the facility to provide the person with care and treatment as a result of which the detention of the person in the facility will no longer be required.

1984-85-86, c.M-13.1, s.27.

c. M-13.1**MENTAL HEALTH SERVICES****Transfer to another facility**

28(1) Subject to subsection (5), the regulations and to the terms of any warrant or order authorizing a patient's detention in an in-patient facility pursuant to section 23, the director may, by order in the prescribed form, transfer an involuntary patient from an in-patient facility to any other in-patient facility.

(2) An order issued pursuant to subsection (1) is to include written reasons for the transfer.

(3) A patient who is the subject of an order issued pursuant to subsection (1) shall be informed promptly of the reasons for the transfer and is entitled on his own request to receive a copy of the order as soon as is reasonably practicable.

(4) Where a patient is transferred pursuant to subsection (1), the director's order is to be accompanied by the certificates, warrant or order authorizing the detention of the person in the facility from which he is transferred, and the director's order and the certificates, warrant or order continue to be sufficient authority for his detention.

(5) On order of the attending physician, a patient detained in an in-patient facility pursuant to section 24 may be transferred from one facility to another facility if the two facilities are in the same municipality.

(6) An order pursuant to subsection (5) is to be in the prescribed form and a copy is to be given to the patient, his or her nearest relative and an official representative for the region.

1984-85-86, c.M-13.1, s.28; 1993, c.59, s.15.

No appeal

28.1 Notwithstanding any other provision of this Act, no review or appeal lies from a decision to transfer a patient pursuant to subsection 28(5).

1993, c.59, s.16.

Patients from outside Saskatchewan

28.2(1) The director may order the return to another jurisdiction of a person who has been detained for the purposes of psychiatric treatment in Saskatchewan if an order has been issued by a person with the lawful authority to make that order in that jurisdiction for the person to be given a compulsory psychiatric examination.

(2) The director may impose any terms and conditions on an order that the director considers necessary for the purposes of this section.

(3) Every order to return a person to another jurisdiction pursuant to this section is to be in the prescribed form.

(4) Where an order is made pursuant to subsection (1), a copy of the order is to be given to the person who is subject to the order and to an official representative for the region.

(5) The person who is subject to the order or an official representative of the region may appeal the order made pursuant to subsection (1) to Her Majesty's Court of Queen's Bench for Saskatchewan, and section 36 applies with any necessary modification.

1993, c.59, s.16.

Temporary removal and return

29 Subject to the regulations, the attending physician, having ascertained that an involuntary patient in the facility:

- (a) requires health care or other services that cannot be provided in the facility; or
- (b) requires a temporary absence from the facility for activities which will be of benefit to the patient;

may authorize the temporary removal of the patient to an appropriate place and, from the time of his removal until his return to the facility, the patient is deemed to continue as a patient of the facility in the same manner and to the same extent and is subject to the same control as if he were in the facility.

1984-85-86, c.M-13.1, s.29.

Departure and return, powers of attending physician

30(1) Where a patient who is detained pursuant to section 24 leaves an in-patient facility without having been discharged, the attending physician may within 21 days thereafter, if he considers it advisable to do so, order that the patient be returned to the facility.

(2) Where the attending physician orders that a patient be returned to an in-patient facility pursuant to subsection (1), the patient may be apprehended and returned to the facility, without a warrant, by:

- (a) any constable or peace officer; or
- (b) any person designated by the attending physician.

(3) Where a patient who is detained pursuant to section 24 leaves an in-patient facility without having been discharged and remains absent from the facility for a period of more than 21 days, he is deemed to be discharged from the facility.

1984-85-86, c.M-13.1, s.30.

Discharge from in-patient facility

31(1) Where the attending physician is of the opinion that a person detained pursuant to section 24 no longer meets the criteria for a certificate set forth in clause 24(2)(a), the attending physician shall:

- (a) issue an order in the prescribed form revoking any certificate then in effect;

c. M-13.1**MENTAL HEALTH SERVICES**

- (b) advise the patient that an order has been issued pursuant to clause (a) and that he is no longer subject to detention pursuant to section 24;
 - (c) provide an official representative for the region with a copy of the order issued pursuant to clause (a); and
 - (d) if the patient requests a copy of the order issued pursuant to clause (a), provide him with a copy.
- (2) Where an order is issued pursuant to clause (1)(a) and the person remains an in-patient in the facility on his own request, section 17 applies *mutatis mutandis*.
- (3) Where there is no lawful authority for detaining an in-patient in an in-patient facility, he shall be discharged:
- (a) on his own request; or
 - (b) where his attending physician considers it advisable that he be discharged, on the direction of his attending physician.

1984-85-86, c.M-13.1, s.31.

Notice to patient

31.1 Where a certificate or certificates issued pursuant to section 24 with respect to a patient expire and have not been replaced by a set of new certificates issued pursuant to section 24, the attending physician shall immediately cause the patient to be informed in writing that:

- (a) the certificate or certificates have expired; and
- (b) he or she is no longer subject to detention or treatment pursuant to section 24.

1993, c.59, s.17.

PART VI
Appeal and Review Procedures

Review panels, appointment, duties, etc.

- 32(1)** The minister shall appoint a review panel for each region.
- (2) Each review panel shall consist of three persons, one of whom is to be a physician and another a solicitor.
- (3) A member of a review panel holds office for a term of not more than three years, and is eligible for re-appointment at the expiration of his term of office.
- (4) The minister shall designate one of the members of each review panel to be chairperson of the review panel and another to be vice-chairperson.
- (5) Subject to subsection (2), the minister may appoint an alternate member for each member of a review panel, and an alternate member has all the powers of a member when he is acting as a member.

- (6) No employee of the Government of Saskatchewan or of any agency of the government or of a facility, no person actively serving as a member of the medical staff of a facility and no person who by blood or marriage is closely related to or connected with a member of that medical staff shall be a member or alternate member of a review panel.
- (7) The minister shall provide any secretarial or other assistance to each review panel that he considers necessary.
- (8) The function of a review panel is the investigation of appeals submitted pursuant to this Act or the regulations and for the purpose of any such investigation the members of the review panel have all the powers of commissioners pursuant to *The Public Inquiries Act*.
- (9) A decision of a majority of the members is the decision of the review panel.
- (10) The members of each review panel and the alternate members are to receive any remuneration and reimbursement for expenses that may be determined by the minister.

1984-85-86, c.M-13.1, s.32; 1993, c.59, s.18.

Notice to patients respecting review panel

- 33(1)** Subject to subsections (3) to (5), the attending physician shall immediately cause written notice to be given to the patient, his or her nearest relative and an official representative for the region in which the facility is located where that patient:
- (a) is subject to detention in an in-patient facility pursuant to section 24;
 - (b) is the subject of a community treatment order pursuant to section 24.3; or
 - (c) is the subject of an order for a transfer pursuant to subsection 28(1).
- (1.1) Notice pursuant to subsection (1) must include the following information:
- (a) the existence and function of the review panel appointed for the region where the facility is located;
 - (b) the name and address of the chairperson of the review panel; and
 - (c) the right of appeal to the review panel, pursuant to section 34.
- (2) On receipt of a notice pursuant to subsection (1), the official representative shall:
- (a) visit the patient;
 - (b) as soon as is reasonably practicable, advise the patient about his right of appeal; and
 - (c) provide any assistance that he considers necessary to enable the patient to initiate his appeal, if the patient wishes to do so.

c. M-13.1

MENTAL HEALTH SERVICES

(3) Subject to the regulations, if a patient is of the opinion that disclosure of the following information to the patient's nearest relative would result in the patient's health or safety being endangered or would be an unreasonable invasion of the patient's privacy, the patient may request the attending physician to withhold from the patient's nearest relative information concerning the patient's:

- (a) detention in an in-patient facility pursuant to section 24;
- (b) being the subject of a community treatment order pursuant to section 24.3; or
- (c) being the subject of an order for transfer pursuant to subsection 28(1).

(4) The attending physician shall consult with an official representative concerning the withholding of information mentioned in subsection (3), if the attending physician:

- (a) receives a written request pursuant to subsection (3); or
- (b) is of the opinion that disclosure of the information to the patient's nearest relative would result in the patient's health or safety being endangered.

(5) If the attending physician is satisfied, after consulting with the official representative as required by subsection (4), that there are reasonable grounds to believe that disclosure of the information mentioned in subsection (3) to the patient's nearest relative would result in the patient's health or safety being endangered or, in the case of a request made by a patient, would be an unreasonable invasion of the patient's privacy, the attending physician shall:

- (a) withhold the information from the nearest relative; and
- (b) make a written record of the withholding and the reasons for it.

1993, c.59, s.19; 1996, c.17, s.8.

Appeals and investigation by review panel

34(1) In this section "**appellant**" means a person described in clause 33(1)(a), (b) or (c) who submits an appeal or on whose behalf an appeal is submitted.

(2) Subject to subsection (4) or (4.1), a person described in clause 33(1)(a), (b) or (c) may submit an appeal in writing to the chairperson of the review panel.

(3) The nearest relative of a person described in clause 33(1)(a) or (b), an official representative or any other person who has a sufficient interest may submit an appeal pursuant to subsection (2).

(4) A person described in clause 33(1)(a) has no right of appeal pursuant to this section unless at least two new certificates have been issued pursuant to section 24 with respect to him since he last exercised his right of appeal pursuant to this section.

(4.1) A person described in clause 33(1)(b) has no right of appeal pursuant to this section unless:

- (a) a new community treatment order is written with respect to the person; or

- (b) more than 21 days have elapsed since a decision was made by the review panel concerning a community treatment order that is still in effect.
- (5) Where certificates are issued pursuant to section 24 which would authorize the detention of a person in an in-patient facility after the expiration of:
- (a) 21 days;
 - (b) six months; or
 - (c) any multiple of six months;

following the date of his admission, the attending physician shall so notify the chairperson of the review panel for the region in which the facility is located, and for the purposes of this section that notice is deemed to be an appeal by the person being detained.

(5.1) There is no right of appeal pursuant to subsection (5) or (5.2) where an appeal of the decision at issue has been considered by the review panel in the preceding 21 days.

(5.2) Where a community treatment order is issued pursuant to section 24.3 that would extend the period of time of the community treatment order beyond:

- (a) six months; or
- (b) any multiple of six months;

following the date on which the person first became the subject of a community treatment order, the attending physician shall notify the chairperson of the review panel for the region of the extension, and for the purposes of section 34, that notice is deemed to be an appeal by the person who is subject to the community treatment order.

(6) On receipt by the chairperson of a review panel of an appeal pursuant to subsection (2), (3) or (5), the review panel shall:

- (a) immediately carry out any investigation that it considers necessary to speedily determine the validity of the appeal; and
- (b) invite the appellant and other persons considered by the review panel to be affected by the appeal to testify or produce evidence relating to the appeal.

(7) The appellant has the right on an appeal:

- (a) to see any written evidence placed before the review panel;
- (b) to be personally present when any oral evidence is presented to the review panel;
- (c) to adduce evidence;
- (d) to cross examine; and
- (e) to be represented by counsel.

(8) The review panel shall decide whether the appellant shall be detained or transferred, as the case may be.

c. M-13.1**MENTAL HEALTH SERVICES**

(9) The chairperson of the review panel shall make a written report of the decision of the review panel and shall, before the end of the third business day following the day that the appeal was received, transmit the report to:

- (a) the appellant;
- (b) the nearest relative or official representative, where he submitted the appeal; and
- (c) the officer in charge of the facility in which the appellant is a patient.

(10) Where the review panel does not find in favour of the appellant, the chairperson of the review panel shall include in the written report transmitted to the appellant pursuant to clause (9)(a) notice of the right of appeal to Her Majesty's Court of Queen's Bench for Saskatchewan, as provided in section 36.

(11) The officer in charge of a facility where an appellant is detained shall take any action that may be required to give effect to the decision of the review panel.

(12) *The Arbitration Act, 1992* does not apply to an investigation pursuant to this section.

1984-85-86, c.M-13.1, s.34; 1992, c.A-24.1, s.61;
1993, c.59, s.20; 1996, c.17, s.9.

Regulations respecting appeals and investigations

35 The Lieutenant Governor in Council may make regulations:

- (a) creating rights of appeal to a review panel in addition to those specified in section 34, and defining the powers of review panels with respect to appeals pursuant to the regulations;
- (b) conferring on review panels any ancillary powers that are considered advisable for carrying out their functions pursuant to this Act and the regulations; and
- (c) regulating practice and procedure before review panels.

1984-85-86, c.M-13.1, s.35.

Appeal to Court of Queen's Bench

36(1) A patient, or a person described in subsection 34(3) on his behalf, may appeal the decision of a review panel respecting an appeal pursuant to section 34 to Her Majesty's Court of Queen's Bench for Saskatchewan within 30 days of the date of the decision.

(1.1) Notwithstanding the provisions of any other Act or the Queen's Bench Rules, once an appeal of a section 24 certificate or a section 24.3 community treatment order is registered with Her Majesty's Court of Queen's Bench for Saskatchewan the appeal shall continue on any new and subsisting certificate or community treatment order notwithstanding that the original certificate or community treatment order that is the basis of the appeal is no longer in effect.

- (2) An appeal pursuant to this section may be made by notice of motion, and the notice of motion is to be served on:
- (a) the director;
 - (b) the officer in charge of the facility in which the appellant is a patient; and
 - (c) any other persons that the court may direct.
- (3) The practice and procedure of Her Majesty's Court of Queen's Bench for Saskatchewan on an application in chambers apply to an application pursuant to this section, *mutatis mutandis*.
- (4) An appeal pursuant to this section is to be supported by an affidavit of the appellant setting forth fully the facts in support of the appeal.
- (5) In addition to the evidence adduced by the appellant, the court may direct any further evidence to be given that it considers necessary.
- (6) The court may confirm or reverse the decision of the review panel and may make any order that it considers necessary to give effect to its decision.
- (7) The decision of the court pursuant to this section is not subject to appeal.
- (8) The court may make any order as to the costs of an appeal pursuant to this section that it considers appropriate.

1984-85-86, c.M-13.1, s.36; 1993, c.59, s.21.

PART VII General

Approved homes

- 37(1)** Subject to the regulations, the director may issue a certificate approving any building or premises as an approved home for the supervised accommodation of persons who require such accommodation because of a mental disorder.
- (2) The department may make payments in support of accommodation and supervision provided to residents by operators of approved homes.

1984-85-86, c.M-13.1, s.37.

Confidentiality

- 38(1)** All records maintained by a facility are the property of the facility.
- (2) Subject to subsections (3) and (4) and to the regulations, no person shall disclose any information concerning a patient that comes to his knowledge in the course of performing his duties pursuant to this Act or the regulations.
- (3) A person shall disclose information described in subsection (2) where:
- (a) the disclosure is required by law; or

c. M-13.1**MENTAL HEALTH SERVICES**

- (b) the minister orders that the information be disclosed.
- (4) A person may disclose information described in subsection (2) where:
 - (a) the information is required to administer this Act or the regulations or to perform a duty or exercise a power imposed or conferred by this Act or the regulations;
 - (a.1) the information is required to assist a person who is receiving services pursuant to this Act to receive other services which are necessary to maintain or restore the mental health of that person; or
 - (b) the disclosure is requested or approved by the patient to whom the information relates.

1984-85-86, c.M-13.1, s.38; 1993, c.59, s.22;
1996, c.9, s.13.

Immunity

39 No action lies or shall be instituted against any person who performs a duty, exercises a power or carries out a responsibility pursuant to this Act or the regulations for any loss or damage suffered by any person by reason of anything in good faith done, caused or permitted or authorized to be done, attempted to be done or omitted to be done, by that person, in the performance or supposed performance of that duty, the exercise or supposed exercise of that power or the carrying out or supposed carrying out of that responsibility.

1993, c.59, s.23.

Limitation

40 No prosecution for an alleged contravention of this Act shall be commenced more than one year after the date of commission of the alleged contravention.

2004, c.L-16.1, s.58.

Assisting unauthorized departure

41 No person shall aid, abet, counsel or wrongfully allow an involuntary patient to depart from an in-patient facility except where the patient has been authorized to depart from the facility pursuant to this Act.

1984-85-86, c.M-13.1, s.41.

Offence and penalty

42 Every person who violates any provision of this Act or the regulations is guilty of an offence and liable on summary conviction to a fine of not more than \$500.

1984-85-86, c.M-13.1, s.42.

Regulations

43 For the purpose of carrying out the provisions of this Act according to their intent, the Lieutenant Governor in Council may make regulations:

- (a) classifying facilities for the purposes of this Act;

- (b) prescribing the services that may be provided in each facility or class of facilities;
- (c) defining the area to be served by each facility;
- (d) governing the operation and inspection of facilities;
- (e) governing the apprehension, admission, detention, care, maintenance, treatment, transfer and discharge of patients;
- (f) governing the removal of involuntary patients from in-patient facilities pursuant to section 29;
- (g) designating special treatments which are not to be administered to involuntary patients except in accordance with certain procedures, and prescribing those procedures;
- (h) governing the release of information obtained pursuant to this Act;
- (i) without limiting the generality of clause (h), respecting applications to a judge for orders for the release of information obtained pursuant to this Act;
- (j) prescribing the forms required for carrying out the provisions of this Act and the regulations;
- (k) governing the granting of certificates of approval in respect of approved homes, the cancellation of those certificates and the fees payable for them;
- (l) prescribing the physical and operating standards to be met by approved homes;
- (m) governing payment by the department for the accommodation and supervision of persons receiving services provided by the minister pursuant to this Act in approved homes;
- (n) prescribing the fees payable by the department to persons acting pursuant to this Act;
- (o) governing the amount of moneys belonging to patients in in-patient facilities that may be held in trust by those facilities and governing the disposition of interest earned on those moneys;
- (p) governing the receiving and holding in trust by an in-patient facility of moneys realized from donations or bequests or moneys otherwise connected with the operation of the facility, and governing the disposition of such moneys;
- (q) governing the establishment and operation of special purpose funds to promote programs for the collective benefit of persons in need of mental health services in Saskatchewan, and governing the disposition of such funds;
- (r) prescribing the duties and responsibilities of the director, regional directors, officers in charge, chief psychiatrists and official representatives appointed or designated pursuant to this Act and the manner in which they are to perform their duties and responsibilities;

c. M-13.1

MENTAL HEALTH SERVICES

- (s) establishing standards governing the provision of mental health services;
- (t) generally for carrying out the provisions of this Act.

1984-85-86, c.M-13.1, s.43.

Crown bound**44** This Act binds the Crown.

1984-85-86, c.M-13.1, s.44.

PART VIII

Repeal, Transitional and Coming into Force**R.S.S. 1978, c.M-13 repealed****45(1)** Sections 10 to 14 of *The Mental Health Act* are repealed.(2) Sections 1 to 9, 15 to 27 and 29 to 66 of *The Mental Health Act* are repealed.(3) Section 28 of *The Mental Health Act* is repealed.

1984-85-86, c.M-13.1, s.45.

Transitional provisions**46(1)** Subject to subsection (2), every person who, on the day before the day on which this Act comes into force, is detained in an in-patient facility pursuant to *The Mental Health Act* and is not discharged is deemed, on the coming into force of this Act, to be detained pursuant to this Act and the provisions of this Act apply to him.(2) Every person who, on the day before the day on which this Act comes into force, is detained in an in-patient facility pursuant to section 15 of *The Mental Health Act* and is not discharged is deemed, on the coming into force of this Act, to have made a voluntary request for services pursuant to section 17 and the provisions of this Act apply to him.(3) Every member of a review panel appointed pursuant to *The Mental Health Act* is deemed to have been appointed pursuant to this Act and:

(a) continues to be a member of that review panel for a period of three years or until his appointment is terminated; and

(b) is eligible for re-appointment.

1984-85-86, c.M-13.1, s.46.