

Instructions for Form 7: Certificate of Leave
(Section 43, *Involuntary Psychiatric Treatment Act*)

The actions and decisions to be documented on this form, which forms a part of the *Involuntary Psychiatric Treatment Regulations*, are to be undertaken in a manner consistent with Canada's accepted obligations under the *United Nations Convention on the Rights of Persons with Disabilities* and in accordance with the guiding principles set out in subsection 2(1) of the Act.

When to use this form:

- To allow a patient to live outside the psychiatric facility for short periods of time.

When filling out the form:

- In accordance with subsection 43(1) of the Act, a certificate of leave may be issued for up to 180 days, but, if the expiration date on Form 4 or Form 5 is a date that occurs before the end date specified on the certificate of leave and Form 5 is not renewed, the patient is no longer considered an involuntary patient and no longer obligated to comply with the conditions of the certificate of leave.
- If the conditions of the certificate of leave are to remain mandatory until the end date specified on the certificate of leave, a new Form 5 must be issued before the patient's involuntary status expires.
- This form, once completed, must be filed with both of the following:
 - the designated NSH or IWK MHA staff or administrative office responsible for managing IPTA health records
 - the provincial IPTA Review Board administration at IPTAadmin@novascotia.ca.

Notes:

- In accordance with subsection 43(4) of the Act, a copy of this certificate must be given to all of the following people:
 - the patient
 - the substitute decision-maker who consented to the certificate of leave
 - the chief executive officer or their designate
 - any other health professional involved in the treatment plan
- It is recommended that a copy of this certificate be sent to the Review Board.
- This certificate is not effective without the consent of the substitute decision-maker.
- The patient may choose to return to the psychiatric facility earlier than the end date specified on the certificate of leave.

- In accordance with subsection 44(1) of the Act, the psychiatrist may cancel a certificate of leave without notice for any of the following reasons:
 - breach of a condition
 - the psychiatrist is of the opinion that the patient's condition may present a danger to the patient or others
 - the psychiatrist is of the opinion that the patient has failed to report as required by the certificate of leave

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I, Dr. _____ (*full name*), a psychiatrist on the staff of the
_____ (*name of psychiatric facility*), a psychiatric facility, am of
the opinion that _____ (*full name of patient*), an involuntary
patient, should be allowed to live outside the psychiatric facility in accordance with this
certificate.

This certificate allows the patient to live outside the psychiatric facility beginning on
___/___/___ (*dd/mm/yyyy*) and ending on ___/___/___ (*dd/mm/yyyy—date no later than
180 days from beginning date*) on the following conditions:

For this certificate of leave to remain in effect, the patient must comply with the medical
treatment that is described in this certificate and must attend appointments with the psychiatrist
and any health professionals referred to in this certificate.

I confirm that the patient's substitute decision-maker _____
(*full name*) has consented to this certificate of leave being issued to the patient.

_____ (*dd/mm/yyyy*) _____
(*date of signature*) (*signature of psychiatrist*)

_____ a.m./p.m. _____
(*time of signature*) (*psychiatrist's name—printed*)

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