







Leave of Absence - Section 17

Name				Date of Birth			
Ward				Nearest Relative			
Section				Date of Ministry of Justice Permissio where applicable			
I (print_name) being the Responsible Clinician of the above named patient, grant leave of absence for the reasons stated below. FOR FURTHER GUIDANCE PLEASE SEE OVERLEAF							
Reasons for Leave	e:						
E.g.: Assess Suitability for Discharge, Short-Term Local Leave, etc.							
If leave is for more than 7 consecutive days, please also explain in the box below the reasons why Supervised Community Treatment (section 17A) is not indicated and why leave is to be preferred. FOR FURTHER GUIDANCE PLEASE SEE OVERLEAF							
Conditions of leave of absence are:							
For the pe		Start Date		_	nd ate		
Specific Conditions of E.g.: (Escorted)(Une per Week)(Overnigh	scorted)(2hrs						
Escorted by and Des E.g.: (Nurse-RMN)							
Reside at Address (If overnight – under	the care of:)						
A copy of this for patients carer or n				nd, if necessary and	l with	the patients permission, to the	
Signed			(Responsible Clinician)				
Print Name			Da	te			
Please sign and date should this authorisation cease to be valid							
Signed			(Responsible Clinician)				
Print Name			Date				

Guidance - How and when to complete this form

(Section 17 applies to patients who are liable to be detained under sections 2, 3, 4, 37, 37/41, 44, 45A, 47, 47/49, 48, 48/49)

When to consider SCT

In respect of detention under section 3 or an unrestricted Part 3 section, when considering granting section 17 leave for more than 7 consecutive days or extending leave which would amount to more than 7 consecutive days, the Responsible Clinician must first consider whether the patient should go on to supervised community treatment (SCT) instead (21.9 of the Code of Practice). Full reasons must always be documented in the patients' notes.

What factors to consider

Some relevant factors to consider when deciding between Section 17 and SCT are tabled below:

Factors suggesting longer-term leave	Factors suggesting SCT			
 Discharge from hospital is for a specific purpose or a fixed period The patients discharge from hospital is on a 'trial' basis. The patient is likely to need further in-patient treatment without their consent or compliance. There is a serious risk of arrangements in the community breaking down or being unsatisfactory – more so than for SCT. 	 There is confidence that the patient is ready for discharge from hospital on an indefinite basis. There are good reasons to expect that the patient will not need to be detained for the treatment they need to be given. The patient appears prepared to consent or comply with the treatment they need – but risks as below mean that recall may be necessary. The risk of arrangements in the community breaking down, or of the patient needing to be recalled to hospital for treatment, is sufficiently serious to justify SCT, but not to the extent that it is very likely to happen. 			

(28.6 of the Code of Practice)

Reasons for and conditions of Leave

Responsible clinicians may grant leave for specific reasons. These may be to assess suitability for discharge, grant short-term local leave (e.g.: 2hrs per week), longer leave at home or another place, or grant leave for the patient to reside in another hospital.

Often RC's may make leave subject to any conditions which they consider in the interests of the patient or for the protection of other people (e.g. specifying that the patient should be escorted by a member of staff).

Revocation

The form should be signed at the bottom overleaf should leave be revoked by the Responsible Clinician as per section 17(4).