

Care under the Compulsory Psychiatric Care Act



Your rights in compulsory care

Information to you who are under the age of 18 and require compulsory psychiatric care



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Hello!

My name is Rebecca. We don't know each other, but I've got something to tell you.

My world fell apart when I was 15 years old. I wound up depressed, I was drinking too much alcohol and at home there were fights. I was only 15, but it got so bad that I wished I were dead.

One morning, the police took me away to compulsory care. I guess a lot of people thought I was hopeless, I thought I was too. I didn't trust adults.

I don't know what you've been through. But it's OK to feel like you've gone off track, lost everything, to cry and to be angry. The pain will pass, it's not the end of the world. There are trustworthy adults all around you.

Don't let a situation, an illness or a person make you give up hope. Life is full of surprises, and one day you will be so proud of yourself for getting through this.

Feel your wrist – feel your pulse. That's life inside of you! You are important, valuable, strong, courageous and unique. The world needs you, and I believe in you!

Hugs, Rebecca Author and lecturer

Here you can write down things you want to remember

You have the right to good care

Healthcare must be safe and secure for you and everyone else.

Staff must have the right training and medical experience. They must also take into account what is best for you when you receive care.

You can't always have your way, but you always have the right to say what you want.

When can you be placed in compulsory psychiatric care?

Normally, no one can give you healthcare against your will.

However, you may be committed to compulsory psychiatric care if you fulfil the three requirements of the Compulsory Psychiatric Care Act (LPT).

The requirements that must be met are:

- You have a serious mental disorder.
- You require 24 hours a day psychiatric care.
- You have refused the healthcare you require.

Compulsory care under LPT

Receiving compulsory care under LPT means that two different doctors have judged that you need compulsory care based on the provisions of the Compulsory Psychiatric Care Act.

Who decides to commit me to compulsory care?

The process may begin when someone around you recognises that you suffer from severe mental health problems and helps you to seek treatment. Sometimes, the police will help you.

When a doctor assesses whether you need compulsory care, he or she will examine you, describe your symptoms, explain why you need care against your will and write a care certificate regarding your need for compulsory care.

But before you are placed in compulsory care, another doctor must examine you and decide that this is what is needed.

It starts in inpatient care

At the beginning of compulsory care, you are in a hospital 24 hours a day, so-called inpatient care. In some cases, you can apply for compulsory care outside the hospital. This means that you do not need to be in the hospital 24 hours a day, as long as you follow the rules set by the doctor. This might mean that you must live in a certain place, take medicine or attend therapy.

You must have a care plan

Staff must make a plan for your care as soon as possible. The care plan must describe what kind of care you need and how it will ensure that you no longer need compulsory care.

When does compulsory care end?

The doctor must continuously assess whether you fulfil the three requirements for compulsory care. If any of the requirements no longer applies, you will no longer be placed in compulsory care.

If the three requirements are still fulfilled, the doctor must apply to a court (the administrative court) within four weeks to extend the period of compulsory care. There is no limit to the number of times it can be extended.

Compulsory care aims to improve your mental health so that you can receive care without compulsion.

You have the right to information

Staff must provide you with information you can understand and must answer your questions.

You have the right to be informed about the care you receive and any plans for future care.

You have the right to know how you may be affected by medication, therapy and other aspects of your care.

Information about treatment and medication

Staff must tell you how different treatments and medications may affect you and your body. You also have the right to be informed about any risks associated with the treatment, whether something could happen when you have taken medication for some time and what side-effects you may experience.

You may read what staff write

You have the right to read your care plan. If possible, staff will prepare the care plan together with you. You also have the right to read your medical records. However, if the doctor believes that reading something in the medical record might

worsen your health condition or care quality, that information can be kept secret from you.

You have the right to ask questions until you fully understand what the staff say.

Who receives information about you?

As a rule, parents receive information about your health and other personal information. However, your age and maturity determine whether they have the right to receive information. If sharing certain information with your parents could negatively impact your health, it can be kept secret.

Healthcare is governed by confidentiality

Confidentiality means that staff cannot speak about your health or other personal information. However, they may share information about you with a hospital or social services if this is necessary to provide you with the care, treatment or support you need.

Staff must report if you are being harmed

If staff suspect or learn that you are being harmed or are at risk of being harmed, they must immediately report this to social services. They may do so if they suspect that you have been subjected to violence, or if they think your parents are not able to properly care for you. It may feel tough that staff make such a report, but they are legally obliged to do so.

When such a report comes to the social services, they will determine whether you need their support and help. You have the right to be informed and to say what you think.

You have the right to a support person

A support person is an adult who comes from outside to support you in compulsory care and for a month afterwards.

The support person helps you with personal matters, talks to you and spends time with you.

A support person is your support, not the staff's or your parents'.

Rules for support persons

Your support person may visit you regularly, but sometimes the schedule and routines of the ward may dictate these visits. In addition to visits, this person can, for example, attend meetings about your care and provide support in administrative court hearings.

The support person has an obligation of confidentiality regarding your health and other personal information. This means that he or she can only share such information with others in exceptional cases.

How to get a support person

Staff must ask whether you want a support person as soon as you feel well enough to absorb this information.

A support person is appointed for you by a patient committee.

If you already have a contact person through social services, that person can be your support person. If you wish to change your support person or have a complaint, you can speak with health care staff or a patient committee.

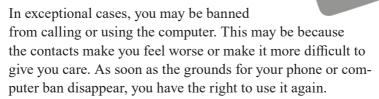


Certain rights may be restricted

When you are cared for in inpatient compulsory care, certain rights may be restricted.

Telephone, computer and mail

Usually, you have the right to stay in touch with your parents, guardians, relatives and friends. Therefore, you can contact anyone you wish during your hospital stay. Staff may not intercept your phone calls or read what you write.





You always have the right to send letters to a lawyer, public counsel or a public authority and to receive mail without staff reading it. However, staff may need to check that mail addressed to you does not contain alcohol, drugs or anything else that might harm you or disrupt the work of the hospital. If staff find such items, they may be confiscated.

Staff may check your belongings

If the doctor considers it necessary, staff may check that you do not have items that you may not have. That includes alcohol, drugs or anything else that could harm you or someone else.

During a check, staff may search your clothes and your bag. They may also ask you to undress so they can see your body naked. Staff are not permitted to touch your body.



Visits

You have the right to meet persons who are important to you during your care. Your parents, siblings and friends are permitted to visit the ward during visiting hours.

In exceptional cases, your visits may be restricted. This may be because the visits make you feel worse.

Activities and time outdoors

You have the right to daily activities at the place where you receive care and to be outdoors for at least one hour per day.

In exceptional cases, these rights may be restricted. This may be because the activities make you feel worse.

However, you may not leave the ward or hospital area alone, while receiving compulsory care.

To do so, you must have a doctor's permission.
This is called leave.

You always have the right to speak your mind in matters that concern you, and adults must consider this.

From the Convention on the Rights of the Child

Coercive measures

Only as a last resort

In inpatient compulsory care, healthcare staff may, in exceptional cases, do things that are against your explicit will. Coercive measures may only be used when there is no other way to address an emergency situation that is dangerous for you or someone else.

If you have been subjected to a coercive measure, it must be recorded in your medical records.

Compulsory medication

If you do not want to take medication, staff must respect that to the extent possible. However, if a doctor decides that you must take a certain medicine, you can be forced to take it.

No one may threaten to restrain you or isolate you from others.

Restrain with a belt

The doctor may decide that you must be restrained with a belt, but only when there is a great risk of self-harm and it is not possible to do it any other way.

You may never be restrained for longer than absolutely necessary.

You may be restrained for a maximum of one hour. If you need to be restrained for a longer period, a doctor must make a new decision that is valid for a maximum of one hour.

There is no limit to the number of decisions the doctor may make. But you must be released as soon as there is no longer any reason for keeping you in restraints.

Healthcare staff must be present in the room with you at all times.

Isolation: staying in a room

The doctor may order that you be isolated by, e.g., locking you up or preventing you from leaving a room.

But this may be done only when there is no other way.

Being disruptive is not enough to be placed in isolation. Your aggressive behaviour must seriously interfere with the care of others.

You may be isolated for a maximum of two hours. If you need to be isolated for a longer period, the doctor must make a new decision that is valid for a maximum of two hours.

There is no limit to the number of decisions the doctor may make, but you must be released as soon as you no longer seriously interfere with the care of others.

Healthcare staff must check on you at regular intervals.

You have the right to appeal

If you think that decisions made regarding your care are incorrect, you can complain to a court called the administrative court, this is called an appeal. But not all decisions can be appealed.

Staff must explain how to appeal

Staff must tell you what decisions you can appeal. They will also explain what to do and how to write an appeal to the administrative court.

Help from public counsel

If you appeal a decision to the administrative court, the court will help you contact a public counsel. This is an adult who will help with your appeal and have contact with the court. It doesn't cost you anyhing to receive help from public counsel.

All children have rights.

This is true regardless of your skincolour, gender, language, nationality or religion.

From the Convention on the Rights of the Child

If you are dissatisfied or have questions

You can always speak with healthcare staff or your doctor. They must help you, and they have the responsibility to provide you with good care.

Feel free to contact me!



Helpline for Children and Young People

If you wish to ask about your rights, or to share something that is not working well in your care, you can contact the Helpline for Children and Young People.

The call is free and will not show up on your phone bill.

Call 020 120 06 06.

The helpline is open weekdays, 9 a.m. to 5 p.m.

When the helpline is closed, you can leave a message on the answering machine. You do not have to tell who you are.

Glossary and abbreviations

Chief physician Doctor specialised in psychiatry and

responsible for compulsory psychiatric

care.

Administrative court Court that can decide about compulsory

Sectioning order Compulsory care decision that must

> exist before you can be committed to compulsory care. The doctor writing the sectioning order must be a specialist in

psychiatry.

A member of staff with special **Contact person**

responsibility for contact with you.

The Compulsory Psychiatric Care Act LPT

The Forensic Psychiatric Care Act LRV

Opportunity to leave the hospital area on Leave

your own, e.g., to be at home.

Inpatient

compulsory care

Compulsory psychiatric care at a hospital

24 hours a day.

Care certificate An initial medical certificate that is

> required to admit you to compulsory psychiatric care. If a care certificate exists you may be detained in a hospital, against your will, before it is decided if you will be committed to compulsory care.

Care plan A document describing the treatment and

other things you need during your care.

Outpatient compulsory care You may have to take a certain medcine or participate in treatment, but do not have to be in the hospital 24 hours a day. The rights of the child can be found in the UN Convention on the Rights of the Child. The Convention on the Rights of the Child is Swedish law.

Rules that apply to all patients can be found in the Health and Medical Services Act (HSL), the Patient Act and the Patient Safety Act (PSL).

Specific rules for psychiatric care against the will of a patient can be found in the Compulsory Psychiatric Care Act (LPT).

Rules on confidentiality can be found in the Public Access to Information and Secrecy Act (OSL).



This informational pamphlet is designed in accordance with the laws and other regulations applicable to compulsory psychiatric care. In order to make the information easy to understand for children and young people, certain legal concepts and expressions have been reformulated.

You always have rights, even in compulsory care. In this leaflet we explain your rights and in which specific cases coercive measures can be used.

Your Rights in Compulsory Care: Care under the Compulsory Psychiatric Care Act

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