## The M.P. Treatment of Criminal Lunatics Confined in Prisons Rules, 2000

MADHYA PRADESH India

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## Rule

## THE-M-P-TREATMENT-OF-CRIMINAL-LUNATICS-CONFINED-IN-PRISO of 2000

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The M.P. Treatment of Criminal Lunatics Confined in Prisons Rules, 2000Published vide Notification No. F. 3-55-98-3-JAIL, dated 4-5-2000, M.P. Rajpatra (Asadharan), dated 6-5-2000 at pages 612 (11-23)In exercise of powers conferred by Clause (23) of Section 59 of the Prisons Act, 1894 (No. 9 of 1894) the State Government, hereby makes the following Rules, namely:-

## 1. Short title, extent and commencement.

(1) These rules may be called The Madhya Pradesh Treatment of Criminal Lunatics Confined in Prisons Rules, 2000.(2) These rules shall apply to the whole of the State of Madhya Pradesh.(3) They shall come into force from the date of their publication in the Official Gazette.

#### 2.

Except where specifically provided in these Rules, the provisions of the Madhya Pradesh Jail Manual will not apply to inmates of the Mental Health Rehabilitation Centres.

#### 3. Definitions.

- In these rules, unless the context otherwise requires,-(a)"Attender" means a ward boy or an ayah who has undergone at least 3 months full time training in a psychiatric unit of a medical college under the supervision of a teacher of psychiatry, viz., Assistant Professor, Associate Professor or a Professor of Psychiatry;(b)"Government " means the Government of Madhya Pradesh;(c)"Inspector

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General" means the Inspector General of Madhyra Pradesh;(d)"Mental Illness" used interchangeably with "psychiatric disorder" or "unsoundness of mind" means-(i)Psychosis, or(ii)Mental Retardation (10 below 70), or(iii)Severe incapacitating neurosis, when so certified by a psychiatrist or a medical officer with training in psychiatry;(e)"Medical Officer with training in psychiatry" means a medical officer (MBBS) with at least 3 months full time training in psychiatric unit of a medical college under the supervision of a teacher of psychiatry, viz., Assistant Professor, Associate Professor or a Professor of Psychiatry; (f) "Non Government Organisation (NGO)" means a body registered with the Registrar of Firms and Societies as a non profit organisation or a Public Trust registered under the Public Trust Act. The registration should be made at least three years previous to date of consideration under these rules. The NGO should have its own budget for the current year;(g)"Nurse" means a qualified nurse who has undergone at least 3 months full time training in a psychiatric unit of a medical college under the supervision of a teacher of psychiatry, viz., Assistant Professor, Associate Professor or a Professor of Psychiatry;(h)"Patient" means an inmate with mental illness;(i)"Psychiatrist" means a medical officer with postgraduate qualifications in psychiatry (MD/DPM);(j)"Recovered patient" means a mentally ill person who after due observation by a psychiatrist is certified to be free from any current mental illness and fit to be discharged, stand that or undergo his prison term in a normal prison as directed by the Competent Court;(k)"Reception order" means an order made under the provisions of any relevant act for admission and detention of a mentally ill person in a psychiatric hospital or psychiatric nursing home and shall include a Mental Health Rehabilitation Centre established under these rules;(1)"Relative" or "Family member" includes any person related to the mentally ill person by blood, marriage or adoption whereas a "friend" means a person acknowledged to be a friend by the person with mental illness;(m)"Superintendent" means the officer appointed by the State Government and to act as the Superintendent of the Mental Health Rehabilitation Centre in which the prisoners with mental illness are ordered to be kept in safe custody.

#### 4.

(1)The Government shall establish and maintain Mental Health Rehabilitation Centres (referred to hereafter as Rehabilitation Centres) for the admission, treatment, care and safe custody of accused persons or prisoners with mental illness or of, persons acquitted on grounds of unsoundness, at such places as it thinks fit.(2)For every Rehabilitation Centre, the State Government shall appoint an Officer-in-Charge and such other officers as may be necessary.(3)the Officer-in-charge shall be a psychiatrist who shall also function as the Superintendent of the Rehabilitation Centre: Provided that for the first five years, in case a suitable psychiatrist is not available a medical officer with training in psychiatry may be appointed: Provided further that in the first instance the medical officer may undergo simultaneous training as defined in clause (c) of Rule 3 of these rules, but the simultaneous training would be for a period of six months and alternate days may be spent in the psychiatry Unit so that the work in the Rehabilitation Centre may not suffer.

#### 5. Accommodation and Facilities.

(1)Prisoners with mental illness shall be detained in Rehabilitation Centres and allowed to communicate freely with each other within their enclosures, but shall be kept entirely separate from

other categories of prisoners. The Superintendent may however confine any particular prisoner with mental illness separately if he considers it desirable on grounds of health or for any other reason, but this may be done only on the explicit advice of the Psychiatrist.(2)Minimum requirements for a 10 bedded facility would be as follows:-(i)Staff,-(a)One full time psychiatrist/medical officer with training in psychiatry;(b)One clinical psychologist/psychiatric social worker;(c)Staff nurse in the nurse: patient ratio of 1: 3;(d)Attenders in the attender: patient ratio of 1: 5;(ii)Physical features-Adequate floor space depending on the number of beds shall be provided: Provided that the essential trained personnel except the Superintendent and Security Personnel (who will be Government servants) may be provided either by the NGO or the Government or both.(iii)Support facilities-The minimum support facilities as detailed as under shall be available:-(a)Provision of emergency care for handling of psychiatrist emergencies;(b)A well equipped Electric Convulsive Therapy facility;(c)Psychodiagnostic facilities;(d)Provision for Recreational/Rehabilitation activities:Provided that for the first five years all the above mentioned facilities except (a) may be available in the nearest medical college hospital/district hospital.

#### 6. Classification of Prisoners with Mental Illness.

- Persons who are certified by a medical officer or psychiatric trainers who may be admitted to a Rehabilitation Centres be divided into five classes,-(1)Persons who have not committed a crime and who are supposed to be person with Mental Illness placed under observation of the Medical Officers.(2)Persons accused of a crime and supposed to be of unsound mind, placed under the observation of a medical officer with training in psychiatry or the civil surgeon under these Rules.(3)Persons accused of a crime and found incapable of making their defence owing to unsoundness of mind and kept under safe custody, under sub-section (2) of Section 330 of the Code of Criminal Procedure, 1973.(4)Persons acquitted after trial on the ground of mental illness who have been found to have committed an act but for the incapacity it is found that he has constituted an offence and who have been detained under directions of the Court in safe custody, under Section 335 (1) (b) of the Code of Criminal Procedure, 1973.(5)Prisoners who have become mentally ill after their admission into jail.

#### 7. Procedure for admission.

(1)Within two months of the coming into force of these rules, for all persons whether convicted or under trial lodged in any of the jails in Madhya Pradesh, who according to the available records are suffering from a mental illness. The Superintendent of concerned Jail shall have such prisoner examined by the Jail Medical Officer. On receipt of a Medical Certificate of the Medical Officer to the effect that the prisoner suffers from a mental illness as defined in these rules, the Superintendent shall,-(a)Forthwith and without delay forward the original medical records and the current observation of the medical officer-in-charge to the Superintendent of the Mental Health Rehabilitation Centre.(b)The Superintendent of the Rehabilitation Centre shall, on receipt of such record, obtain the advice of the psychiatrist or of a medical officer with training in psychiatry' and if so advised send a request of transfer for the said person.(c)On receipt of such a request of transfer the Superintendent of the concerned Jail shall make arrangements, as laid down in these rules for the transport, food and escort for the said prisoner to reach him to the Mental Health Rehabilitation

Centre as soon as possible and in any case later than a fortnight from the receipt of such request.(2)The Superintendent of any jail shall, if in his opinion or on the opinion of the medical officer of the jail or the civil surgeon of the district, a prisoner has developed a mental illness, or on verbal request of the inmate himself or on the written application of his relative or friend, or on the written recommendation of an authorised visitor of the jail, to the effect that the prisoner is suffering from a mental illness as defined in these rules, have examined or cause him to be examined to him by two independent medical officers, one preferably a medical officer with training in psychiatry, without delay and in any case not later than a fortnight of such application. After the completion of the examination and above, the Superintendent shall send the medical certificates and such other documents as necessary to the Superintendent of the nearest Mental Health Rehabilitation Centre and follow the procedure for transferring the mentally ill prisoner to the Mental Health Rehabilitation Centre following the procedure laid down in sub-rule (1)

#### 8. Appointment of Visitors and Inspection.

(1)The Government shall appoint a Board of visitors for the Rehabilitation Centre.(2)The Board of Visitors referred to in sub-rule (1) above shall be set up under the provisions of Section 37 of the Mental Health Act, 1987 and the rules made thereunder insofar as they are not inconsistent with these rules.(3)The duties of the visitors so appointed and the inspection of the Rehabilitation Centre shall be as laid down in Section 38 of the Mental Health Act, 1987 and the rules made thereunder insofar as they are not inconsistent with these rules.

### 9. Discharge and Removal.

(1) If in the opinion of the Superintendent of the Rehabilitation Centre or the Psychiatrist incharge of medical care at the Rehabilitation Centre, or on the verbal request of the inmate himself or on the written application of his relative or friend, or on the written recommendation of an authorised visitor of the Jail, to the effect that the inmate has recovered from the mental illness as defined in these rules, the Superintendent shall without delay and in any case not later than a fortnight of such application, examined by two independent medical officers, one of whom should preferably be a medical officer with training in psychiatry.(2)In the event of the medical officers issuing a certificate confirming that the patient has recovered the provisions of sub-section (2) of Section 30 of the Prisoners Act, 1900 shall apply. In particular, for persons ordered by Courts to be kept in safe custody under sub-section (2) of Section 330 and clause (a) of sub-section (1) of Section 335 of the Criminal Procedure Code, 1973, the case of recovered inmates will necessarily be referred back to the Court which originally ordered safe custody, for further orders regarding the said inmate :Provided that before issuing such certificate the medical officers referred to in sub-rule (1) shall take into consideration the long-term rehabilitation needs and the possibility of relapse in going back into the prison atmosphere.(3)The Transfer from one State to another of inmates whose term of detention is about to expire shall be governed by the Rules 784, 785, 787 and 790 of the Madhya Pradesh Jail Manual, except in so far as they are inconsistent with these Rules.

#### 10.

On completion of the term of sentence of a convict or on his being discharged by Court in case of under trials or on the completion of the period of safe custody as ordered by a Competent Court as the case may be the said inmate :-(a)shall be transferred to a mental hospital, if in the opinion of a psychiatrist the said inmate required further prolonged psychiatric care in an institutional setting.(b)if in the opinion of the psychiatrist such an inmate has recovered from his illness and is capable of living independently to a reasonable extent, the said inmate shall,-(i)be discharged into the care of such relative or friend who to the satisfaction of a Magistrate furnishes a bond, with or without sureties, for such amount as may be specified in this behalf, and gives an undertaking to take proper care of the mentally ill persons.(ii)be sent to a suitable half-way home set up by the Government or a NGO assisted by the Government with funds or to such other NGO run organisations as may be decided upon by the visitors to the Mental Health Rehabilitation Centre.

#### 11.

The removal of inmates of the Rehabilitation Centre to a Jail, other psychiatric hospital or such other place of safe custody shall be governed by the Sections 47 to 49 of the Mental Health Act, 1987 and the rules made thereunder insofar as they are not inconsistent with these rules.

#### 12.

(1)No prisoner with mental illness will be transferred unless certified by a medical officer to be fit to travel. The certificate of fitness will be sent by post to the Superintendent of the Rehabilitation Centre. Every precaution shall be taken to secure that the Mentally ill prisoner is properly cared for as regards his food, clothing and bedding in accordance with the provisions of the Madhya Pradesh Jail Manual except that two suits of clothing will be provided instead of one and ordinary clothing shall be permitted.(2)The Jail Officer who despatches the prisoner with mental illness is held responsible that the escort is provided with sufficient means to purchase suitable and necessary articles of diet for the use of the patient during his journey and that orders are given that in case the patient refuse food or become sick he shall be taken to the nearest hospital for advice or treatment. No fetters shall be used in any case.(3)Every female patient shall be accompanied by a female attendant or relative in addition to the usual escort. The Police Department shall in the absence of a female relative, make arrangements for a female attendant and shall bear the travelling and other expenses incurred on behalf of the said attendant.

## 13. Management and regulation of the Rehabilitation Centre.

(1)Subject to the orders to the Inspector General of Prisons, the regulation and management of the Rehabilitation Centre shall vest in the Superintendent appointed by the State Government, provided that he will be assisted in his duties by at least one or more medical officers preferably with training in psychiatry, and a reputed NGO appointed by Jail Department as per the procedures laid down under these rules: Provided that in matters relating to the psychiatric, medical or rehabilitative

aspects, joint opinion of another psychiatrist or medical officer with training in psychiatry shall be binding.

### 14. Powers and duties of the Inspector General of Prisons.

- Subject to the orders of the State Government, the Inspector General of Prisons shall exercise general control and Superintendence over the Mental Health Rehabilitation Centre in accordance with the provisions of these rules.

## 15. The appointment, guidance, control, punishment and dismissal of officers and their responsibilities, duties and powers.

(1)The Director of Medical Education and the District Magistrate will exercise such powers and perform such duties in the Management of the Rehabilitation Centres in accordance with the provision of Rules 76, 80 to 84 and 116 of the Madhya Pradesh Prisons Rules, 1968 except insofar as they are not inconsistent with the provisions of these rules.(2)The provisions of the Madhya Pradesh Jail Manual relating to powers and duties of the Jailors shall apply to Deputy Jailors and Assistant Superintendent and those relating to Assistant Jailors shall apply to Hospital masters, Physical Instructors and Medical Store Keepers of the Mental Health Rehabilitation Centre except in so far as they are not inconsistent with these rules.(3)the Superintendent and other officers of the Rehabilitation Centres shall exercise such powers and perform such duties as laid down in the Madhya Pradesh Jail Manual except in so far as they are not inconsistent with these rules.

#### 16. Prisons Offences and Punishments.

- The provisions of the Prisons Act, 1894 and the Madhya Pradesh Jail Rules, 1968 and the Madhya Pradesh Jail Manual relating to prison offences and punishment of inmates shall not apply to inmates of Rehabilitation Centres established under these rules.

#### 17. Use of fetters.

- No fetters or arms will be used under any circumstances to restrain inmates of Rehabilitation Centres. In the event of an inmate indulging in violent behaviour minimum chemical and physical restraint will be used as appropriate, strictly and entirely on the advise of a psychiatrist. The psychiatrist may in the case of a patient requiring intensive treatment in this regard, propose transfer of the patient to a mental hospital or a psychiatric ward of a Government Hospital as deemed necessary, and the Superintendent will make necessary' arrangements.

## 18. Security and use of arms.

(1) The provisions of the Prisoners' Act, 1900 and the Madhya Pradesh Jail Manual regarding the safe custody of prisoners shall apply to patient in Rehabilitation Centres.(2) The provisions of sub-rule (1) shall not apply to the inmates of the Rehabilitation Centres insofar as they deal with the

daily routine of the inmates.(3)The daily routine of the prisoners with mental illness would be made individually for each inmate by the clinical psychologist assisted by the psychiatric social worker in consultation with the psychiatrist. This would keep in mind the rehabilitation needs of the inmate and his physical and mental capability. The routine would endeavour to realise the full potential of the inmate as an individual.(4)The rules regarding security and security bonds, as laid down in the Madhya Pradesh Jail Manual and the rules regarding uniform, accountements, ordinance supplies and military training as laid down in the said manual shall apply to Rehabilitation Centre except insofar as they are not inconsistent with these rules.

### 19. Rehabilitation, Recreation and other Therapies.

(1)The Mental Health Rehabilitation Centre shall provide adequate facilities for the recreation of the inmate.(2)Counselling services, behaviour therapy and occupational therapy shall be provided for the prisoners with mental illness.

#### 20.

(1)the mentally ill prisoners shall have adequate opportunity to meet and interact with their family members. The frequency, duration and the setting of the meeting shall as prescribed by the psychiatrist keeping in mind the nature of the mental illness and the possible consequences of intensive family contract on the mental health of the patient.(2)The provisions of the Prisoners Act, 1900 and the Madhya Pradesh Jail Manual regarding the visiting hours will not be applicable in the Mental Health Rehabilitation Centres.

## 21. Pay, allowances, services conditions, selection and training of personnel.

(1)This Superintendent warders and other staff of the Jail department for posting to the Mental Health Rehabilitation Centres would be selected from a list of the existing personnel of the Jail department, those who has given their comments.(2)The Inspector General of Prisons shall constitute a selection committee for the purpose of sub-rule (1) which shall include a psychiatrist as one of its members.(3)the committee constituted under sub-rule (2) shall make the recommendations for selection after assessing the suitability of the candidate keeping in mind the special communication skills, empathy and other such qualities needed for handling the mentally ill prisoners.(4)The personnel posted in the Rehabilitation Centres would be required to undergo full time training in a Psychiatric Unit of a Medical College, District Hospital or a Psychiatry' Institute, as may be prescribed, for a minimum period of three months.(5)The pay, allowances, service conditions of the personnel posted in the Rehabilitation Centre shall be governed by their parent department.

## 22. Maintenance of records and submission of reports.

(1)The record of the Rehabilitation Centre shall be maintained in accordance with the provisions of Section 12 of the Prisons Act, 1894 and the Rules 905 and 907 to 912 of the Madhya Pradesh Jail

Manual. The preparation and submission of reports shall be governed by the Rules 25, 101, 112, 111, 282 (3), 898, 337, 920, 404 and 405 of the Madhya Pradesh Jail Manual except in so far as they are not inconsistent with these rules.(2)the medical records of the inmates of the Rehabilitation Centres shall be maintained in Form VI of the Mental Health Act, 1987 and other records as may be directed by the psychiatrist of the Rehabilitation Centre.

#### 23. Diet, clothing and bedding of persons with Mental illness.

(1)All persons with mental illness shall be given the diet according to the scale laid down in the Madhya Pradesh Jail Manual. Provided that the patient would be free to receive food on a regular or ad hoc basis from family members, friends or social organisations, provided further that in the event of physical illness requiring special diet, provisions of the Jail Manual shall apply.(2)With respect to clothing and bedding the following shall be provided:-

White Shirts - 2
Pyjama - 2
Ordinary Blankets - 2
While Jacket - 1
Ordinary Bed - 1

Footwear (Slippers or Sandals) - 1 Pair:

Provided that there should be no insistence on the inmates wearing a uniform. They shall be free at all times to receive, wear and use items of clothing, bedding etc. from friends, relatives or voluntary' or other organisations.

## 24. Article introduction or removal which are prohibited.

- The introduction or removal of the articles within or out of Rehabilitation Centre without due authority shall be prohibited, in accordance with provisions of Rules 570 to 573 of the Madhya Pradesh Jail Manual except insofar as they are not inconsistent with these rules.

## 25. Dealing with patients with violent symptoms.

(1)Mentally ill prisoners who suddenly :-(a)Suffers a relapse of his active psychosis or becomes violent and unmanageable, or(b)Causes bodily injuries or becomes a threat to the personal safety of himself or others, or(c)Causes or is likely to cause loss of property, shall immediately be placed under such minimum physical or chemical restraint as may be directed by the medical officer, or the psychiatrist i/c of the Mental Health Rehabilitation Centre.(2)Such mentally ill prisoner as referred to in sub-rule (1) shall be kept in isolation or removed to a mental hospital, psychiatric ward of a medical college or district hospital as may be directed by the medical officer or the psychiatrist in this regard.(3)On such a mentally prisoner being adequately treated and capable of coming back to the Mental Health Rehabilitation Centre, he shall be transferred back: Provided that the opinion of the psychiatrist shall be necessary before such a transfer can take place. The transfer of inmates from

one Rehabilitation Centre to another or from one hospital to another hospital or a mental hospital shall be governed by the Rules 791,801 to 813 of the Madhya Pradesh Jail Manual, except insofar as they are not inconsistent with these rules.

### 26. Application of Jail Manual rules relating to 'Criminal lunatics'.

- Rules 868, 873 to 878 of the Madhya Pradesh Jail Manual relating to 'Criminal lunatics' will apply to the prisoners with mental illness of the Rehabilitation Centre, except that the procedures and forms required would be as per the provisions of the Mental Health Act, 1987.

## 27. Transmission of appeals and petitioners from inmates and their communications with their relatives and friends.

- The provisions of Rules 759 to 763, 766 to 770, 772 to 782 of the Madhya Pradesh Jail Manual shall apply for the transmission of appeals and revision received from the inmates and their communications with their relatives and friends.

#### 28. Selection and the Role of NGO's.

- One or more NGO's will assist the Department of Jail and the Department of Medical Education in the Management of the Mental Health Rehabilitation Centre. The NGO's will be invited/selected from application received on the basis of reputation, experience, professional expertise and personnel by the Department of Jails on the advice of the Advisory Committee.

## 29. Mandatory & Autonomous Responsibilities.

(1)NGO's will be responsible for autonomously planning and implementation of total rehabilitation process. They will work as partners of the Department of the Jail and the Department of Medical Education and extend full co-operation and collaboration towards realising the rehabilitation process, which will include psychological, Social, Recreational, Occupational and Vocational Rehabilitation as specified in the Appendix appended to these rules.(2)the NGO's shall also assist the staff of the Mental Health Rehabilitation Centre for assessment therapeutic services and any other services as mutually agreed upon them.(3)the NGO's may also be called upon to provide training to the staff posted in the Rehabilitation Centres with a view to enhancing their capacity to effectively deal with the mentally ill inmates and contribute to their rehabilitation.

#### 30. Qualification and Duties of the Professional Staff.

(1)A Clinical Psychologist shall be an M.Phil. in medical and social psychology', alter a post-graduation in applied psychology' with clinical psychology and qualified for psycho-diagnostic evaluation behaviour therapy and various forms of psychotherapies. He shall assist in diagnosing a person with psychiatric disorders and would also be responsible for evaluating the present level of functioning, understand the psychodynamics of his abnormal behaviour and plan strategies to

correct his behaviour through Psycho/Behaviour therapy techniques. He will mediate the planning and implementation of social, recreational and vocational rehabilitation.(2)A Psychiatric Social Worker shall be an M.Phil, in Psychiatric social work after a post-graduation in Medical and Psychiatric Social work, and qualified for socio-dynamic evaluation of a mentally ill person and impart appropriate socio-intervention techniques. He shall be responsible for evaluation baseling social functioning levels, and plan intervention strategies for socio-psychological-integration and rehabilitation. He will also be responsible to mediate the planning and implementation of recreational and vocational rehabilitation. (3) Occupational Therapist shall be a graduate or a post-graduate in occupational therapy, from a Rehabilitation Council of India recognised Institute. He shall be responsible for evaluating levels or motor functioning and the specific motor skill and ability necessary for a certain vocational and recreational activity. To enhance individual motor skills abilities vis-a-vis the vocational/recreational activity, he shall draw up an exercise and stimulation programme for the individual. He shall also equipped to suggest and make necessary' modification in the environment for optimal functioning and yielding maximum output.(4)A Vocational Instructor shall be basically a creative individual having experience and necessary qualifications for initiating and organising various vocational activities. He should have patience, high motivation for work, readiness to learn and be compassionate. (5) House Master shall be a volunteer Jail Warder who has opted to work in the Rehabilitation Centre. He shall have the intensive training in assisting in the care of mentally ill people. He would function under the close supervision of mental health professional.

#### 31. Professional Committee.

(1)A Medical Review Committee shall consist of the members who treating psychiatrist. Clinical Psychologist, Psychiatric Social Worker and the Occupational Therapist.(2)NGO Family correspondence group shall include the respective house masters and one staff from the NGO as a monthly rotation basis. The roster will be drawn and monitored by the Psychiatric Social Worker.

## 32. Advisory Board.

(1)There shall be an Advisory Board constituted for all the Mental Health Rehabilitation Centres established by the Government in the State.(2)The Board shall consist of the following members :-(a)The Principal Secretary Jail - Chairman(b)The Principal Secretary, Medical Education - Vice Chairman(c)The Secretary, Social Welfare(d)The Inspector General of Prisons(e)The Director, Medical Education(f)The Director, Health Services(g)The Director, Social Welfare(h)The Secretary, State Mental Health Authority - Member Secretary(3)The Advisory Board shall meet at least once every six months and take steps for running of the Mental Health Rehabilitation Centre.

## 33. General Holidays.

- All Sundays, Republic Day, Independence Day, Holi, Muharram, Gandhi Jayanti, Dasera, Diwali (Two days), Christmas Day, Id-Ul-Fitar, Id-i-Milad, Shiv Ratri, Janmashtmi, Ramnavami, Raksha Bendhan, Ganesh Chaturthi, Mahaveer Jayanti and Guru Nanak Day shall be the general holidays for the officers and servants of the Mental Health Rehabilitation Centre and no work except such as

may be necessary' for the internal management and domestic economy of the Centre or is required by an emergency, shall be permitted in above holidays. Appendix [See Rule 29(1)]

- 1. The Rehabilitation Activities & Procedures. (1) The rehabilitation process shall start with detailed assessment and baseline recording of the level of functioning of the patients. Each patient will be assessed independently by the various experts in the team, viz., the clinical psychologist, Psychiatrist Social Worker, Occupational therapist and vocational instructor. Based on their reports an Individual Intensive Rehabilitation Programme (IIRP) will be drawn for each patient, which would categorically indicate all the daily routine activities for each patient for a period of 3 months. The 'house incharge' will be responsible to implement the IIRP on a regular basis.
- (2)After every 3 months the patient will be re-evaluated for progress by all the concerned therapists and experts and a second (IIRP) will be drawn for the next 3 months. This process would continue for the total duration of stay of the patient.
- 2. Recreation and Other Activities. (1) This would include social and solliary active which would help the patients to break the monotony and drudgery of life and help to enhance the level of motivation and enthusiasm leading to an improved quality of life activities would also evolve physical fitness, psychomotol skills improve social skills and cognitive abilities. Such activities would range from active and passive games and sports, music, expressive arts, psychodrama, art & craft, reading, watching the TV etc.
- (2) Vocational Training.- Most patients will be required to routinely involve themselves in vocational activities, like, toys making, handi-crafts, printing, boxed making, masala grinding, sewing etc.(3) Behaviour Therapy.- Techniques to be used to keep their motivational levels high viz. Token economy and other reinforcement techniques.
- 3. Social Audit. (1) A categorically planned social Audit system should be a part of functioning of the Mental Health Rehabilitation Centre. The system would essentially aim to involve the people of the society to understand and contribute to the well being of the inmates of the Rehabilitation Centres.
- (2)The system would involve Biannual invitation to people of the local society through advertisement in the papers preferably in the 1st week of months of February & September. The insertion in the local newspaper will be done to invite volunteers from the society to spend 2 days in the Mental Health Rehabilitation Centre. The invitation in the paper would generally say "please help us through your experience to serve better". It will also have a proforma which could be filled in

by the prospective volunteer. (The proforma would contain Name, Age, Sex, Address, Phone, Qualification, Profession, etc.). Ten (10) persons from the total number of applicants will be chosen by a draw of lots.(3)They would then be guests invited to spend 2 days at the Rehabilitation Centre. On the first day all the guests will be given a half day introduction to the concept of mental illness, its classification, professionals associated with mental illness minimum required services and rules and regulations, for the next one and half days they would be given free access to Rehabilitation Centre, where they would be free to meet and talk to anyone, could access any information (except confidential case files of patients) and involve themselves in any of the activities that they wish to.(4)At the end of 2 days they would be required to give a detailed report, about their experience, their suggestions, Guidelines for this report will be in the form of a proforma (appended). The authors of the report would also be required to sign a consent and permit the NGO to publish or make public the report if they may think so.(5)Visitor's Register.- A visitor's register will be maintained for enabling each and every visitor to make their suggestions for improvement in the Administration and care of the mentally ill persons.

4. Extended Family Contract. - (1) As a special privilege, the inmates of Rehabilitation Centres will be allowed a live-in-family contact. A review committee involving the treating psychiatrist the Clinical psychologist and the Psychiatrist Social Worker and the occupational therapist, would draw list of patients after each time the IIRM is prepared every 3 months. The list would include all patients to whom the family contact privilege may be extended. An invitation would be extended to the family members of not more than 4 persons at a time to apply for a 3 days visit to the Rehabilitation Centre. They would be permitted to stay in the family cottage, at subsidised rates of Rs. 50/- per day (lodging boarding charges). The inmates may, for the duration of this visit, stay all 24 hours with the family though his food and medicines etc. may be sent in.

(2)The family members may distribute eatable and/or clothes or other consumer items to the other inmates also.(3)They may also socially interact and involve in group activities of the Rehabilitation Centre: Provided always that the prior written permission of the Review Committee has been obtained.

5. Volunteer Services. - Active family members, or interested social workers from the outside world may apply for volunteering their services to the Rehabilitation Centre. A volunteer may be selected after screening by the review committee. At any given time not more than 2 volunteers may be permitted to work in the campus of the Rehabilitation Centre. No volunteer may be given permission to spend more than 5 days, or not less than 2 days in the campus of the Rehabilitation Centre. A volunteer may be allowed to

offer his services to the Rehabilitation Centre more than once, but always alter a gap of at least 4 weeks. The volunteer may be allowed to stay else where and reach the Rehabilitation Centre on his own. He will be required to spend at least 8 hours a day at the Rehabilitation Centre to a maximum of 2 hours a day, this would however involve his stay in the family cottage, resting and activities of daily living.

- 6. One letter a month to the family. The Psychiatrist Social Worker will be in charge of the letter writing NGO family correspondence group. The patients will be motivated to write at least one letter in a month. In case the patient does not want to write or cannot write, the group will write the letter to the patients' family, every month. The letter would include a resume of his health, his daily activities, his special interest activities, his achievements during the month. How he socialises and may be remember the family. The last paragraph of the letter should always contain an invitation to reply alongwith the occasionally asking for photograph etc.
- 7. On going training. (1) Training of the Jail Warders.- The team of experts of the NGO will train the warders of the Rehabilitation Centre in knowing, understanding and caring the mentally ill persons. The training would involve the following topics:-

(1)Mental Illness-nature & needs,(2)Classification of MI,(3)Communication skills,(4)Special needs of the MI,(5)Drug administration and side effects management,(6)Emergency in a Rehabilitation Centre,(7)Counselling skills,(8)Observation techniques & records,(9)Behaviour therapy techniques of dealing with violent patients,(10)Letter writing skills. The training will be based on interactive mode and mock case presentation.(2)On going workshops on the needs of the warders should be organised. At least 6 programmes every year.(3) Training of the Volunteers. - A 3 days comprehensive training programme should be organised for the volunteers of not more than 12 and not less than 6 every year. The training should include :-(1)MI-Nature & need,(2)Classification of MI,(3)Concept of Drug, treatment, Psychotherapy and Rehabilitation,(4)Professions involved in the care giving,(5)Counselling skills,(6)Communication skills,(7)Relevant behaviour therapy techniques to increase desirable behaviour and decrease undesirable behaviour, (8) Violence in the mentally ill and the management,(9)Management of psychiatric emergency,(10)FLL Drug and side effects.The training will be based on interactive mode and mock care presentation.(4)Workshops for lay people in mental health awareness. - Should organise at least 4 workshops in a year. The course content would include :-(1)MI-nature and needs,(2)Classification of MI,(3)Professionals in MI,(4)Modes of treatment,(5)Prevent of MI, Mental hygiene,(6)Extend support to mentally ill,(7)Invitation to be volunteers.

8. Rehabilitation on discharge. - The NGO will have the responsibility for proper social integration and rehabilitation of the patient alter discharge. The NGO also must have provisions for long stay homes, half way homes and vocational Rehabilitation day centres, so as to meet the needs of patients discharged from Rehabilitation Centre.