# Form G6 - Regulation 7(4)(a),(d) and (e) Mental Health Act 1983

## Section 19 — Authority for transfer from hospital to guardianship

### PART 1

(To be completed on behalf of the managers of the hospital where the patient is detained)

Authority is given for the transfer of [PRINT full name of patient]

who is at present liable to be detained in [name and address of hospital]

to the guardianship of [PRINT full name and address of proposed guardian]

in accordance with the Mental Health (Hospital, Guardianship and Treatment) (England) Regulations 2008.

This transfer was agreed by the [name of local social services authority]

on [date of confirmation].

The transfer is to take place on [date].

Signed on behalf of the hospital managers

PRINT NAME Date

### PART 2\*

<\*Complete only if proposed guardian is not a local social services authority>

(To be completed by the proposed private guardian)

My full name and address is as entered in Part 1 of this form and I am willing to act as the guardian of the above named patient in accordance with Part 2 of the Mental Health Act 1983.

Signed Date

#### IF THE GUARDIAN IS TO BE A PRIVATE GUARDIAN, THE TRANSFER MAY NOT TAKE PLACE UNTIL BOTH PARTS OF THIS FORM ARE COMPLETED

© Crown copyright 2020

Mental Health

[www.gov.uk/dhsc](https://www.gov.uk/dhsc)

This publication is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated. To view this licence, visit [nationalarchives.gov.uk/doc/open-government-licence/version/3](http://nationalarchives.gov.uk/doc/open-government-licence/version/3/)

Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

