



Ministry of Health, Welfare and Sport

You have had a crisis measure imposed

What does
this mean?

Samen gezond, fit en veerkrachtig



You have had a crisis measure imposed. What does this mean?

Your consent is needed for treating a psychiatric disorder. A health professional may also sometimes treat you without your consent, for example if you are causing a dangerous situation because of a psychological condition. That is known as compulsory medical care.

This type of care is handled in the Compulsory Mental Healthcare Act (the Wvggz in Dutch).

Compulsory medical care cannot just be imposed. It is only allowed in extreme cases in which there are no longer any other options.

There are two ways in which you can be given compulsory medical care:

- The crisis measure
- The care authorisation

This brochure is about crisis measures. The mayor may decide to impose a crisis measure, which means that you may be compelled to undergo treatment immediately. A judge can extend the crisis measure.

The brochure explains what the law says about crisis measures, what the consequences can be for you and what you yourself can do.

People you may be involved with for a crisis measure

- The mayor ([see page 8](#))
- A lawyer ([see page 12](#))
- A patient advocate ([see page 12](#))
- Your representative, if applicable ([see page 13](#))
- A public prosecutor ([see page 5](#))
- A judge ([see page 7](#))
- The care coordinator ([see page 8](#))
- A medical director ([see page 11](#))
- An independent psychiatrist ([see page 5](#))
- Your GP if necessary

Instead of 'he/she' we have used 'they' in this brochure.

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What is a crisis measure?

A crisis measure is imposed by the mayor in case your psychological disorder results in behaviour that leads to acute danger for yourself or for others. It means that you are obliged to undergo medical treatment. This may be physical or psychiatric treatment. Your freedom is therefore being restricted. Because the measure is imposed in a crisis situation, it probably means that you will be compulsorily admitted to a mental healthcare institution. If it is less urgent, a care authorisation will be requested.

Do you have a crisis card?

Have you drawn up a crisis card in the past? Or do you have a self-binding declaration? Or have you recorded your wishes in some other way stating what those around you should and should not do? Or who they should call, for example? Make sure that the health professionals and your care coordinator receive this crisis card or declaration of intention.

Why might a crisis measure be imposed on you?

A crisis measure can be imposed if the following points apply:

- If you are causing acute danger for yourself or others (which the law refers to as **serious harm**).
- If it is suspected that this serious harm is the result of a psychiatric disorder.
- If you do not give consent to the care.

A crisis measure can only be imposed on you as a last resort, when there are no further options for preventing serious harm. This is known as the 'harm criterion'. You will find more information in the appendix ([see page 18](#)).

Additionally, this measure can only be imposed if the serious harm is an immediate threat and action has to be taken immediately.

Visit from the independent psychiatrist

In your case, serious harm is seen as an immediate threat. That means that there does not already have to be a full diagnosis of a psychological disorder. The fact that there is a strong suspicion is enough. A psychiatrist does however have to confirm that suspicion. That is why an independent psychiatrist will come to visit you. This will be a psychiatrist who has not treated you over at least the last year. The psychiatrist will examine you and draw up a **medical statement**. The medical statement describes your state of health, whether your conduct is causing a serious harm, and what that serious harm entails. It also states whether the psychiatrist suspects that your behaviour is the result of a psychological disorder, what care they consider necessary and whether you consent to this care or not. The psychiatrist can request any police data and Justice Department data from the public prosecutor in order to help them assess the risk of serious harm. The psychiatrist can also request data from the public prosecutor about previously issued crisis measures or care authorisations.

The mayor can only impose the crisis measure once they have received the medical statement from the psychiatrist.

Discussing the issues

What serious harm (danger) is causing your behaviour, according to the health professionals present? It is useful to discuss this. If you agree with them, you may perhaps be able to take steps to eliminate this danger. You can then explain it as calmly and clearly as possible to the health professionals, even if you do not agree that you are causing any danger.

Compulsory medical care before the decision

It is possible that the health professionals will give compulsory medical care at an earlier point, in other words, before the mayor has imposed the crisis measure. They will only do that if they believe compulsory medical care to be necessary at that point in the crisis situation. You may for example not be allowed to leave a certain room until the psychiatrist has come to examine you or you may be given medication already to calm you down. The health professionals will make this decision to avoid dangerous situations.

It will take the mayor several hours to gather all the information needed to make the decision. If the health professionals have good reason to believe that the mayor will indeed impose a crisis measure on you, they may for example take you already to a suitable location (a crisis care centre). They may also give you medical care that cannot wait. This care may be given for a maximum of 18 hours. If the care providers want to keep giving you this compulsory medical care after that, a crisis measure *must* have been issued to that effect by the mayor.

Health professionals who decide to give you compulsory medical care earlier must inform the care provider and the mayor about it. If you believe their decision was wrong, you can file a complaint about it. For more information about filing complaints, [see page 14](#).

If you experience symptoms or are taking medication

If you experience medical symptoms, always tell the health professionals on the spot. That will make sure that you get the care you need.

If you do not know exactly what medication you are taking, give the packaging to the health professionals. Otherwise, have the health professionals contact your GP.

The mayor decides

The mayor will make a decision as quickly as possible about whether to impose a crisis measure on you. Before taking a decision, the mayor will read the medical statement and they will also check whether a care authorisation or crisis measure has previously been imposed on you and whether you have previously had compulsory medical care. They can request this information from the public prosecutor.

Getting your opinion heard

The mayor will also ask your opinion (if possible). We call this *hearing* your opinion – the mayor listens to your side of things. The mayor (or their deputy) asks questions about what you think of the situation. You can also explain why you disagree with the care that is going to be given to you. It is also possible that you do not want your opinion heard or that it is not possible to do so, for instance because you are unconscious or not talking sense. In that case, the mayor must describe in their decision why they were unable to hear your side of things.

Given the information provided, if the mayor believes that all the conditions have been met, they can decide to issue the crisis measure. They will inform you about their decision in writing.

Appeal

If you disagree with the mayor's decision, you can get your lawyer to lodge an appeal with a judge. The mayor must ensure that a lawyer is assigned to you (if you do not have one) within 24 hours. The crisis measure will *not* be postponed as a result. This means that the healthcare providers can continue imposing compulsory medical care. The judge will determine afterwards whether imposing the crisis measure was correct.

If you want to lodge an appeal, this must be done within three weeks after the mayor's decision. The appeal must be submitted in writing. Your lawyer can tell you more about this.

The judge's ruling

The judge will make a ruling within four weeks of the appeal being submitted. Discuss this ruling thoroughly with your lawyer. Get them to explain clearly what the ruling means for you. You cannot lodge a higher appeal against the judge's ruling.

The crisis measure is imposed. What happens next?

The care provider and your care coordinator

Once the mayor has decided to impose a crisis measure, they will designate a care provider who has to provide that care for you. This is the mental healthcare institution that will provide compulsory medical care for you. If you are not yet receiving compulsory medical care, the care provider will make contact with you and give you more information.

The mayor will also designate someone as your care coordinator and another person who has the role of medical director. The care coordinator is the person who has responsibility for your compulsory medical care and who coordinates it. You will be in close contact with this person. The medical director is a psychiatrist. Their key task is to keep track of legislation and regulations and to translate them into usable recommendations and guidelines for the people providing assistance.

Together with your care coordinator, you can discuss every aspect (if possible) of the compulsory medical care imposed upon you. Always tell them what your wishes are regarding the care. For instance, you can discuss with them how you prefer to receive your medication, whether you are already taking the medication, and what steps you think would be important for making you feel better about it.

Your opinion about the care

Always let your care coordinator know what your opinion is about the care. That does not mean that they have to abide by your wishes, but they may take them into account. This is not possible if they are not aware of your views.

Once the crisis measure has been issued, your care coordinator determines what care (as described in the crisis measure) will be given to you at what point. Before they do so, they will always check how you are doing and they will discuss the care that they want to provide you with.

What compulsory medical care can be imposed?

The Compulsory Mental Healthcare Act (Dutch: Wvfgz) describes what forms of compulsory medical care can be included in the crisis measure.

Undergoing medical treatment

You may be required to undergo medical treatment. This may comprise:

- Dispensing fluids, nutrition and medication.
- Medical checks or other medical actions for treating your psychological disorder.
- Therapeutic treatment.
- Treatment for a physical condition that is associated with your psychological disorder.
- *Example: you refuse medication for diabetes and that refusal is because your psychosis has led you to believe you do not need the medication.*

Restricting your freedom

Your freedom of movement may be restricted. This may be done a number of ways:

- Restricting your freedom of movement to go and stay where you wish, by detaining you within a building or by using physical restraint.
- *Example: the health professionals that are present may allow you into the living room but not into the kitchen, or they may temporarily restrain you and hold you down.*
- You may be placed in a specially furnished, closed room or locked in your own room.
- You may be subject to monitoring.
- *For example: by a camera.*
- Examination of clothing or physical examination.
- *Your clothes or your body may be examined. The examination may not be inside your bodily cavities, such as your mouth.*
- Your home or place of residence may be searched for any substances present that could affect your behaviour or for dangerous items.
- Checks may be made for any substances present that could affect your behaviour or for other dangerous items. These may be taken away.
- *Examples: alcohol or a knife.*
- Restrictions on the freedom to arrange your life as you wish. You may be required to attend some specific event or appointment, or not to go somewhere.
- *Examples: not being allowed to use a phone, the Internet or certain social media.*
- Limitations on your visits.
- Admission to specific accommodation.

You may be compulsorily admitted to an institution for mental healthcare. You will then be taken to an institution. It is possible that you may then not leave the institution or treatment unit again independently.

If you do not cooperate, you may be physically forced to undergo the compulsory medical care. This can for instance mean that you are held down while medication is administered. It may also be the case that you are not allowed to leave a specific room. Physical coercion will always be applied in a way that is safe for you.

You will probably be compulsorily admitted to a mental healthcare institution because the measure is being imposed in a crisis situation. However, it is also possible for compulsory medical care to be given that does not require you to be admitted, for instance in an outpatient clinic or at your home. This is referred to as *outpatient care*. The care provider always checks whether it is safe and responsible to give outpatient compulsory medical care in your case, and what you think about it.

The mayor states in the crisis measure what forms of compulsory medical care *may* be imposed on you. This does not therefore always have to involve all possible measures. The your care coordinator is the individual who ultimately determines *what* compulsory medical care will be given and when.

If you disagree with a decision taken by your care coordinator who is responsible for your compulsory medical care, you can file a complaint. You can find more information about lodging complaints on page 12.

What does compulsory medical care have to comply with?

The compulsory medical care imposed on you must comply with a number of points:

- **Quality**
The Compulsory Mental Healthcare Act states that the care must be provided in accordance with a specific guideline. This guideline is called the *Multidisciplinary Guideline on Coercion and Compulsion*. If you would like to know more about this, ask your healthcare provider about it. The compulsory medical care must of course also comply with the usual quality requirements and guidelines that apply to care that you receive voluntarily.
- **Proportionality**
The severity and burden of compulsory medical care must be in proportion to the objective of that care.
- **Efficiency**
The compulsory medical care must be suitable for achieving its objectives. For example if your psychosis makes you aggressive towards others and you refuse medication, you may be forcibly medicated to avoid the risk of you attacking others.
- **Subsidiarity**
There must be no other, less drastic measures available that could achieve the same goal. The compulsory medical care must therefore comprise the least severe and burdensome measures that can achieve the objective of the compulsory medical care.
- **Safety**
Compulsory medical care must be safe for you and for others.
- **The 'last resort' requirement**
This means that compulsory medical care can only be imposed on you when other options have been exhausted. There are no longer any other possibilities for ensuring that serious harm is eliminated. So if you are prepared to be given certain care voluntarily, compulsory medical care may perhaps still be preventable. It can also lead to compulsory medical care being stopped (or stopped earlier).

If you think that your compulsory medical care does not meet the requirements stated above, you can file a complaint.

How long does the crisis measure last?

The mayor may extend the crisis measure for a **maximum of three days**. If the crisis measure ends at the weekend or on a public holiday, then the period is extended until the next working day. The maximum period of three days does not mean that compulsory medical care always stops after three days. If the public prosecutors think that the crisis measure is needed for longer, they can apply to the judge for an extension: an authorisation to continue the crisis measure. They will ask for this within one working day after the mayor imposes the crisis measure.

The judge then has three more working days to come to a decision about extending it. The judge will hear your side of things before taking a decision, unless you are unwilling or unable. The judge will also ask your lawyer and (if applicable) your representative what they think about the crisis measure being extended.

- If the judge decides **not** to grant the extension:
 - The crisis measure ends. Your compulsory medical care stops on the day the judge issues their ruling. This can therefore take a total of up to eight days (for example if a weekend or public holiday is involved).
- If the judge decides they **will** grant the extension:
 - The judge issues a 'crisis measure extension authorisation'. This lasts for three weeks.

The judge decides to grant the extension

The extended crisis measure (the judge's ruling) states what compulsory medical care can be given to you. If your care coordinator and other people treating you believe that you still need compulsory medical care after those three weeks, they can apply for a care authorisation for you. This will let them impose compulsory medical care on you for a longer period.

If you would like to know more about what a care authorisation is and what it can mean for you, take a look at the brochure 'A care authorisation is being prepared for you. What does this mean? And what can you do?'.

The judge decides not to grant the extension

As soon as the crisis measure or its extension ends, the compulsory medical care stops if no further compulsory medical care has been requested for you. This means that your care coordinator cannot impose any more care on you. You can of course make agreements with them about any further care that you want to receive voluntarily.

Temporary interruption or termination

You can submit a request for the compulsory medical care to be terminated or temporarily interrupted. The medical director can also make that decision.

- A temporary interruption.
- This is possible for instance if you want to attend an important family event, perhaps such as a funeral or a wedding.
- Terminating compulsory medical care.
- For instance if you believe that the danger no longer exists. This is also possible if you want to receive the care voluntarily from now on.

Who can request the temporary interruption or termination?

You can request this from the medical director¹. You have to submit a request to them to that effect in writing. The letter must state clearly why you are making the request. The request can also be submitted by:

- Your lawyer (on your behalf);
- Your representative (on your behalf);
- Your care coordinator;
- This could for instance be because they think that compulsory treatment is no longer needed or because they want to get you to see if you can cope without compulsory medical care.

The medical director can impose conditions on the temporary interruption or termination. If you do not comply with these conditions, the medical director can revoke their decision and compulsory medical care can be imposed again immediately. If you disagree with the medical director's decision, you can file a complaint with the Complaints Committee. Get the patient advocate to advise you.

¹ The medical director is a psychiatrist. Their key task is to keep track of legislation and regulations and to translate them into usable recommendations and guidelines for the people providing assistance.

The lawyer and the patient advocate

The lawyer

If you do not have a lawyer yet, the mayor will make sure that you have one. This is done immediately after the crisis measure is imposed.

The lawyer:

- gives you legal assistance, free of charge;
- works as per your instructions;
- represents your interests in the procedures relating to the compulsory medical care;
- *(For example any extension to the crisis measure.)*
- knows the legislation and the procedures that will affect you;
- makes sure that your side of the story is clearly presented in all the procedures;
- can answer all your questions about your rights and obligations associated with the crisis measure and the procedures;
- comes to visit you if you are compulsorily admitted or if you are not able to visit them;
- is there to help you.

The patient advocate

The patient advocate:

- gives you advice and assistance free of charge;
- is someone you can go to with questions and complaints about the care provided and about your rights and obligations;
- *(For example about the way the care providers treat you, decisions made by your care coordinator, the quality of the treatment, or the restrictions on freedom.)*
- supports and advises you in your discussions with your care coordinator;
- provides support when drawing up important documents such as the care card and the care plan;
- is not employed by the care provider but instead works for an independent foundation called PVP;
- represents your interests, as you see them;
- will not do anything without your permission.

When the mayor imposes a crisis measure, they will ask your permission for your contact details to be passed on to the patient advocate. If you give that permission, the patient advocate will contact you themselves.

If you would like more information, take a look on the website www.pvp.nl. Please note that the information provided on this website is in Dutch.

The person representing you

In some cases, someone will represent you. This representative acts on your behalf in contacts with your care coordinator, the care provider and others looking after you. You will be present or you will be involved as much as possible. The patient advocate can give you more details about the role of the representative.

You will be given a representative in the following situations:

- You decide for yourself that someone should represent you.
- You are deemed mentally incompetent. That means that your care coordinator believes that you are “incapable of reasonably assessing your own interests”.
- You are a minor.

You decide for yourself that someone should represent you

- You decide for yourself who your representative will be. The representative must be at least 18 years of age and they must be willing to represent you.
- The representative can refuse care on your behalf, but they cannot give consent on your behalf that you will receive care. So if the representative agrees to the compulsory medical care but you do not, your opinion prevails.

You are deemed mentally incompetent

Being mentally incompetent in this sense means you are not capable of representing your own interests. This can change over time or can depend on the subject matter. During a psychotic episode, for instance, you might be incapable of making decisions about the care you need but perfectly able to make choices about your day-to-day activities. That is why a doctor must always determine – for each decision you make concerning your compulsory medical care – whether you are capable to make your own decisions at that time.

If the doctor determines that you are mentally incompetent, the following options are possible (in this sequence):

- The judge may already have appointed a mentor or guardian as your representative.
- Or: you have previously stated who your representative is. The representative must be at least 18 years of age and they must be willing to represent you.
- Or: your partner or a family member can act as your representative. The representative cannot give consent on your behalf that you will receive care, but they can *refuse* care on your behalf.
- If there is no representative, the care provider can ask the judge to designate a mentor or guardian.

You are a minor

In the case of someone who is underage, the law determines who the representative is.

- If you are aged under 12:
 - You parents or guardians are your representatives.
 - The representative can give consent on your behalf that you will receive care, or refuse it on your behalf.
- If you are aged between 12 and 16:
 - You parents or guardians are your representatives.
 - The representative can refuse care on your behalf, but they cannot give consent on your behalf that you will receive care.
- If you are aged 16 or 17:
 - You may have yourself represented, but that is not required. You decide for yourself who your representative will be. The representative must be at least 18 years of age and they must be willing to represent you.
 - If you are aged 16 or 17 and deemed mentally incompetent: your parents or guardians are your representatives.

Complaints

Your care provider is affiliated to an independent complaints committee. This complaints committee will handle your complaints. These could be about aspects such as all kinds of decisions made about your compulsory medical care by the medical director and your care coordinator. The ruling by the complaints committee is final for the care provider. The ruling can result in a decision being reversed or in you receiving compensation for damages. Appeals can be lodged with the judge against the complaints committee's ruling. This can be done by you, your representative or the care provider. The law defines the areas that the complaints committee can make rulings on. This can for instance be about:

- restrictions on your freedom;
- implementation of the crisis measure or extension of the crisis measure;
- a request for temporary interruption or termination of the compulsory medical care;
- decisions relating to determining your mental competence to make decisions.

If you have a complaint,

it is always a good idea to obtain advice first from the patient advocate. They can do the following for you:

- Advise you about how to handle your complaint.
- Help you file your complaint.
- Advise you whether it would be useful to have your lawyer help you with the complaint.
- Help you if you would rather resolve the complaint yourself together with your care coordinator (in other words, without the complaints committee).

What else can you do?

Get family and/or friends involved

Your family or others close to you (e.g. friends) can help you or provide support. This can be good for the contacts with your care coordinator or others providing care for you. Your family and those close to you generally know you well. They can therefore help create a clear description of what you do or do not want. They can also be a major source of support if you are compulsorily admitted, for instance if you have pets that will need somebody to look after them or if you have other business outside the institution that you want to have handled.

Always tell your care coordinator which of your friends and relatives may help you. That way, the care providers will know who they are dealing with. They will also know who can and cannot speak on your behalf. The people treating you may only give your friends or relatives information about your treatment if you give permission.

Your family and those close to you have rights under the Compulsory Mental Healthcare Act. There is also a family confidant for those who are close to you. Ask your healthcare provider about this. For more information about the family confidant, please go to the website www.familievertrouwenspersonen.nl. Please note that the information provided on this website is in Dutch.

Crisis card

The crisis card says what your wishes are in the event of a crisis. Think of items such as:

- What should bystanders and people providing assistance do and not do?
- Who can they call for you?
- What agreements have been made, for example with the people treating you or the crisis service?

Do you have a crisis card?

Have you drawn up a crisis card in the past? Or have you recorded your wishes in some other way? Make sure that the health professionals and your care coordinator receive this crisis card or declaration of intention. This is how the care providers can know whether you already have agreements in place. It also helps the people assisting you to deal with you better on the spot. It can even lead to compulsory medical care being deemed unnecessary or to it being stopped more quickly.

If you do not have a crisis card

If you do not have a crisis card but would like one for the future, ask your care coordinator for advice and information.

More information about this can also be found on the website of the Crisiskaart Nederland foundation, www.crisiskaart.nl.

Further information

If you would like to read more about certain topics, there is a list of useful websites below. These websites mainly provide information in Dutch.

- **Compulsion in the care sector**

More information about compulsion in the care sector.

www.dwangindezorg.nl

- **Crisis card**

More information about crisis cards.

www.crisiskaart.nl

- **The patient advocate**

More information about the patient advocate.

www.pvp.nl

- **MIND**

MIND aims to prevent psychological problems and to support people faced with them.

They do this by providing information, carrying out research, implementing projects and campaigning.

www.wijzijnmind.nl

- **MIND Korrelatie**

'MIND Korrelatie' is a nationwide organisation. They offer anonymous, professional psychological and psychosocial help.

MIND Korrelatie gives individual advice and help to anyone who requests it. This can be done by phone and online.

www.mindkorrelatie.nl

- **113 Suicide Prevention**

The '113 Zelfmoordpreventie' foundation (Suicide Prevention) is the national organisation for preventing suicides.

www.113.nl

- **Eigen Kracht Centrale foundation**

The 'Eigen Kracht Centrale' foundation (Standing Strong Centre) supports organisations and authorities throughout the Netherlands in handling questions from the general public.

www.eigen-kracht.nl

- **Choices in Mental Healthcare**

'Kiezen in de ggz' (Choices in Mental Healthcare) is a website for adults aged 18 and over who are looking for a care provider for their psychological complaints.

www.kiezenindeggz.nl

- **Ypsilon**

Unites family members and others close to people who are susceptible to psychoses.

www.ypsilon.org

- **LSFVP (Landelijke Stichting Familievertrouwenspersonen - National Foundation for Family Confidants)**

Family confidants provide information, advice and support to family members and others who are close to clients in the mental healthcare sector.

www.familievertrouwenspersonen.nl

- **Guideline for coercion and compulsion in mental healthcare**

This is where you can find all the guidelines about coercion and compulsion in the mental healthcare sector.

https://richtlijndatabase.nl/richtlijn/dwang_en_drang_in_de_ggz/dwang_en_drang_in_de_ggz_-_startpagina.html

Appendix Explanation of the harm criterion

Compulsory medical care may only be imposed as a last resort. That means that there must no longer be any other options for avoiding the dangers caused by your behaviour. This is known as the ‘harm criterion’.

The harm criterion consists of:

- The serious harm (causing danger)
- The psychological disorder that leads to the serious harm
- Resistance

These various aspects are explained briefly below.

Serious harm

The crisis measure is imposed if someone believes that you are causing acute danger. This is the *harm* criterion, as explained in the brochure. The person reporting this can for example be the doctor treating you, the municipality or a family member.

According to the Compulsory Mental Healthcare Act (Dutch: Wvggz), there is serious harm if there is a high level of risk of:

- you seriously harming yourself or others. That harm covers:
 - endangering life;
 - severe physical injury;
 - severe psychological harm;
 - serious material, intangible or financial damage;
 - severe neglect or social deterioration;
 - severely disrupted development (for example of an unborn child);
- endangering your own safety because you have become influenced by others;
- triggering aggression in others through your disruptive behaviour;
- endangering general safety in your surroundings by your behaviour.

Compulsory medical care will only be imposed as a last resort, when there are no longer any other options for avoiding the serious harm.

Suspicion of a psychological disorder

The crisis measure is only issued if your behaviour (the conduct that causes the serious harm) is the result of a psychological disorder. Three conditions have to be met in that case, which have to be determined by a psychiatrist.

- The psychiatrist suspects that you have a psychological disorder;
- Your behaviour creates serious harm (or a risk thereof);
- The serious harm is a consequence of the disorder.

Resistance

Compulsory medical care can only be imposed if you do not agree to the recommended care. Saying that you disagree with the care that is going to be given to you can therefore be enough.

If you do agree to the care, say so to the health professionals that are present. Also state then *what* care you do and do not want to receive. You may perhaps have drawn up a crisis card or self-binding declaration previously.

The health professionals will assess whether they think that the care you are prepared to receive voluntarily is sufficient. If they think this is not enough to prevent danger, the mayor may decide to impose a crisis measure on you. The health professionals can proceed directly to compulsory medical care.

Mental competence and representation

In law, you are deemed mentally competent until a doctor determines otherwise. Being deemed mentally incompetent is important in terms of who may represent you, in other words who may act on your behalf to represent your interests.

Mental incompetence

You are deemed to be mentally *incompetent* if the doctor believes that you are “incapable of reasonably assessing your own interests” in a specific decision. Under the Compulsory Mental Healthcare Act (Wvggz), your care coordinator is always the one who determines whether or not you are mentally competent. This can vary from one case or one moment to another. The independent psychiatrist who comes to draw up your medical statement can also make this determination.

If you resist, it does *not* matter whether you are deemed mentally competent or not: any resistance against compulsory medical care is taken seriously, even if you are not mentally competent and your representative has agreed to the treatment. Compulsory medical care may then only be given on the basis of the crisis measure.

Mentally competent resistance

If you *are* mentally competent and the serious harm only affects *you*, and your life is *not* in danger, your wishes and preferences must be respected, in principle.

Always discuss your resistance and any assessment as being mentally incompetent with your lawyer and your representative.

