



شعبة الترجمة الرسمية
Official Translation Department

Mental Health Care Law

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Translation of Saudi Laws



NOTE:

The translation of Saudi laws takes the following into consideration:

- Words used in the singular form include the plural and vice versa.
- Words used in the masculine form include the feminine.
- Words used in the present tense include the present as well as the future.
- The word “person” or “persons” and their related pronouns (he, his, him, they, their, them) refer to a natural and legal person.



Mental Health Care Law

Article 1: Definitions

In this Law, the following terms shall have the meanings assigned thereto, unless the context requires otherwise:

Mental Health Care: A branch of public health concerned with mental health prevention, treatment, and rehabilitation services.

Law: Mental Health Care Law.

Regulations: Implementing Regulations of this Law.

Mental Health Treatment Facility: A facility, whether independent or affiliated with another public or private health care facility, that meets the specifications for mental health care and provides mental health services, including diagnosis, treatment, and rehabilitation.

Mental Disorder: A disturbance in an individual's thought, mood, awareness, memory, or other intellectual faculties, in whole or in part. Such disturbance is deemed severe if it causes impairment of two or more of the following functions:

- a) sound reasoning and the capacity to make decisions;
- b) normal behavior as defined by local norms;
- c) the capacity to distinguish reality and know and be insightful of the nature of one's illness or causes thereof, and accept treatment; and/or
- d) the capacity to meet basic life needs.

Mental disorder under this Law shall not include any person who merely has: intellectual disability, immoral conduct, or abusive consumption of or addiction to alcohol, narcotics, psychotropic substances, or drugs.

Psychiatric Patient: A person suffering or suspected to be suffering from a mental disorder.

Psychiatrist: A person holding a specialty degree in psychiatry and licensed to practice as a psychiatrist.

Psychologist: A person holding a university degree in psychology and licensed to practice as a psychologist.

Social Worker: A person holding a university degree in social work or sociology and licensed to practice as a social worker.

Psychiatric Nurse: A person holding a bachelor degree or associate diploma in nursing and licensed to practice as a nurse.

Counselor: A person holding a university degree in counseling and licensed to practice as a counselor.

Consultant Psychiatrist: Any psychiatrist licensed to practice as a consultant psychiatrist.



Specialist Psychiatrist: Any psychiatrist licensed to practice as a specialist psychiatrist.

Attending Physician: Any physician responsible for the examination and treatment of psychiatric patients in a mental health treatment facility.

Guardian: A person having guardianship over another person.

Psychiatric Recovery Facility: A facility for housing psychiatric patients who have exceeded their prescribed duration of treatment at a mental health treatment facility and still need housing services.

Article 2: Purposes

This Law aims to:

1. regulate and promote mental health care services required for psychiatric patients;
2. protect the rights and dignity of psychiatric patients, their families, and the community; and
3. develop a mechanism for dealing with and treating psychiatric patients at mental health treatment facilities.

Article 3: General Supervisory Board for Mental Health Care

A. The Minister of Health shall issue a decision establishing a board named the “General Supervisory Board for Mental Health Care”, to be formed as follows:

1. A *Sharia* advisor from the Ministry of Justice, Chairman.
2. An advisor from the Ministry of Interior, member and Vice-Chairman.
3. Mental Health Care Director General at the Ministry of Health, member and secretary.
4. A representative from the Ministry of Social Affairs, member.
5. A legal advisor from the Ministry of Health, member.
6. A member of the Human Rights Commission, member.
7. Three consultant psychiatrists from the Ministry of Health and other medical bodies, members.
8. A psychologist, member.
9. A social worker, member.

The Board may seek the assistance of experts and specialists, without having the right to vote.

B. The term of Board membership shall be four years and may be renewed for a similar term(s).

C. The Minister of Health shall appoint the Board secretariat, and determine work procedures of the Board and remunerations of its members.



- D. Each agency shall nominate its representative and a substitute therefor, provided that Board members are of a rank not lower than grade 12 or its equivalent.

Article 4

The General Supervisory Board for Mental Health Care shall:

1. propose ideas for the development and improvement of mental health care and submit the same to the Saudi Health Council;
2. oversee the implementation of this Law, ensure compliance therewith by mental health treatment facilities in all sectors and monitor said facilities, whether directly or through committees set up for the purpose of monitoring all mental health treatment facilities and psychiatric patients hospitalized at such facilities, and examine and verify records and reports and take necessary action to rectify any violations;
3. set up local supervisory boards for mental health care in provinces and counties as necessary;
4. supervise and monitor the work of local supervisory boards for mental health care;
5. examine the affairs of psychiatric patients and the reports submitted to it by local supervisory boards for mental health care;
6. consider grievances filed by patients, their families, or their representatives upon exhausting all grievance procedures before the local supervisory board for mental health care;
7. set up committees from among Board members or other experts or specialists to review involuntary admission decisions; and
8. any other responsibilities as the Council of Ministers may determine.

Article 5

- A. The Board shall convene at least once every two months, or upon a call by its Chairman when necessary.
- B. Board meetings shall be deemed valid if attended by the Chairman or Vice-Chairman and at least two thirds of the members.
- C. Decisions shall be passed by the majority vote of attending members. In case of a tie, the chairman of the meeting shall have the casting vote.
- D. Neither the Chairman nor any Board member may take part in the discussion or decision involving a patient who is related to him up to the fourth degree.
- E. The Board shall issue decisions on grievances filed by patients, their families, or their representatives within a period that preserves the rights of patients. Such period shall be specified in the Regulations.



Article 6: Local Supervisory Boards for Mental Health Care

A. The Minister of Health shall issue a decision for the establishment of local supervisory boards for mental health care, as follows:

1. A *Sharia* advisor from the Ministry of Justice, Chairman.
2. An advisor from the Ministry of Interior, member and Vice-Chairman.
3. Two psychiatrists, at least one of which is a consultant, members.
4. A psychologist, member.
5. A social worker, member.
6. A local citizen known for integrity, to be nominated by the General Supervisory Board for Mental Health Care, member.

The Board may seek the assistance of experts and specialists, without having the right to vote.

B. The term of board membership shall be four years and may be renewed for a similar term(s).

C. The Minister of Health shall appoint the board secretariat, and determine work procedures of the board and remunerations of its members.

D. Each agency shall nominate its representative and a substitute therefor, provided that board members are of a rank not lower than grade 12 or its equivalent.

Article 7

The local supervisory board for mental health care shall:

1. oversee the implementation of this Law; ensure compliance therewith by mental health treatment facilities in all sectors falling within its jurisdiction; monitor mental health treatment facilities, whether directly or through committees set up for the purpose of monitoring all mental health treatment facilities and psychiatric patients hospitalized in all departments thereof; examine and verify the accuracy of records and reports; take necessary action to rectify any violations; and submit periodic biannual reports to the General Supervisory Board for Mental Health Care;
2. consider grievances filed by patients, their families, or their representatives in accordance with the provisions of this Law;
3. approve the administration of unorthodox treatments to involuntarily admitted patients upon the request of the attending physician, providing justification and anticipated results, if the patient is incapable of giving consent or his guardian cannot be reached;
4. review reports provided by mental health treatment facilities relating to involuntary admission and treatment cases;
5. revoke, at the board's discretion, involuntary admission decisions issued by mental health treatment facilities and assess the condition of patients



- involuntarily admitted to mental health treatment facilities for periods exceeding six months;
6. assign, when needed, an external consultant psychiatrist to assess a patient's mental state within two weeks from the date of filing the grievance, for the Board to decide on the grievance;
 7. nominate caretakers for involuntarily admitted patients who lack legal capacity and have no guardians, until they regain legal capacity, and file said nomination with the competent court for approval;
 8. receive notifications provided by mental health treatment facilities concerning involuntary admission cases, monitor said cases to assess their need for continued hospitalization, and ensure that their rights under this Law are protected; and
 9. attend to any other duty assigned thereto by the General Supervisory Board for Mental Health Care in accordance with this Law.

Article 8: Meetings of Local Supervisory Boards for Mental Health Care

- A. The board shall convene once every 15 days, or upon a call by its chairman when necessary.
- B. Board meetings shall be valid if attended by the Chairman, or Vice-Chairman, and at least two thirds of the members.
- C. Decisions shall be passed by the majority vote of attending members. In case of a tie, the chairman of the meeting shall have the casting vote.
- D. The board shall submit a periodic annual report on its activities to the General Supervisory Board for Mental Health Care.
- E. Neither the chairman nor any board member may take part in the discussion or decision involving a patient who is related to him up to the fourth degree.
- F. The board shall decide on grievances filed by patients, their families, or their representatives within 21 business days from the date of filing the grievance. If the grievance is not decided upon within said period, it may be submitted to the General Supervisory Board for Mental Health Care.
- G. If a member of the board is a physician working for the mental health treatment facility against which a grievance is filed, an external consultant psychiatrist shall be assigned to examine the relevant patient and submit a report to the board within two weeks from the date of assignment.

Article 9: Rights of Psychiatric Patients

Under this Law, a psychiatric patient shall have the following rights which may be asserted by his guardian or attorney-in-fact:

1. Receiving due care in a safe and clean environment; receiving treatment in accordance with commonly accepted standards; and affording him, if capable, the opportunity for actual and continuous participation in the treatment plan.



2. Respecting his individual rights in a healthy and humane environment that preserves his dignity, meets his medical needs, and enables him to perform his religious obligations. Admission of a patient to a mental health treatment facility shall be in accordance with the provisions of this Law.
3. Informing him, prior to commencement of treatment, of the diagnosis and progress of the treatment plan; and informing him, prior to consenting to treatment, of the expected response, benefits, risks, and possible side effects as well as available treatment alternatives and possible amendments thereto. If there is a need to transfer a patient within or outside a mental health treatment facility, said patient or his guardian, if the patient is incapable of consent, shall have the right to be informed of the transfer and reasons therefor.
4. Not subjecting him to any experimental treatment, even if such treatment is licensed or included in medical research or an experiment, without his informed written consent if capable of consent, his guardian's written consent if incapable of consent, or the authorization of the local supervisory board for mental health care if he has no guardian.
5. Refraining from administering any type of treatment to him without his consent, or the consent of his guardian if incapable of determining his need for treatment. If the patient is incapable of determining his need for treatment and has no guardian or the guardian cannot be reached, the necessary treatment may be administered subject to the approval of two psychiatrists and notification of the local supervisory board for mental health care.
6. Informing him if he is capable, or his guardian, of treatment services available at the mental health treatment facility, how to be eligible for them, when he may be declined the same, and the party covering the costs of said services.
7. Protecting him against degrading treatment; financial, physical, or sexual abuse; or other forms of abuse, and refraining from subjecting him to corporal or moral punishment for any reason or threatening him with the same.
8. Respecting his freedom and refraining from restricting it by isolation unless necessary as decided by the attending physician and for a limited period, using the least restrictive means under humane conditions as set forth in the Regulations.
9. Granting him the freedom to move within and outside the mental health treatment facility if so permitted by treatment and safety requirements.
10. Retaining or disposing, if capable, or his guardian, if incapable, of his personal belongings that are in his possession, and granting him access to means of communication in accordance with treatment requirements and in such a manner that does not conflict with safety requirements.
11. Enabling him to receive visitors in accordance with the announced visitation policy of the mental health treatment facility. Visits may be prohibited or limited as per treatment requirements, provided that his family members are allowed to communicate with him, and are informed and updated of his condition and treatment plan in all circumstances, in accordance with the Regulations.



12. Receiving *ruqyah* (incantation), in coordination with the attending physician, at the mental health treatment facility in accordance with *Sharia*, if requested by the patient or his family.
13. Protecting the confidentiality of his personal information and refraining from disclosing the same, except upon the request of the General Supervisory Board for Mental Health Care, or a local supervisory board for mental health care; the request of judicial or investigation authorities, stating the reason for obtaining such information; for treatment purposes; or due to the existence of an imminent threat to himself or others.
14. Enabling him, or his guardian, to file any complaint against any person or party at the mental health treatment facility if justified, without prejudice to the quality of care provided to him.
15. Appointing an attorney-in-fact to defend his rights within and outside the mental health treatment facility.
16. Notifying him, or his guardian, of his involuntary admission to a mental health treatment facility upon issuance or renewal of an involuntary admission decision, and notifying him in writing of the reason for admission and the procedures to be followed if he wishes to revoke such decision, pursuant to Article 14(E) of this Law.
17.
 - a) Notifying him, or his guardian, in a clear language of his legal status at the mental health treatment facility upon issuance or renewal of the admission decision, and notifying them in writing of all his rights, as well as the reason for admission and the procedures to be followed if he wishes to be discharged.
 - b) The mental health treatment facility shall explain the aforementioned rights to the psychiatric patient or his guardian, whether said patient is an inpatient or outpatient, and the mental health treatment facility shall provide him with a copy of the same. The mental health treatment facility shall display copies of said rights in clearly visible areas within the facility to be read by patients and visitors.

Article 10: Voluntary Admission

Admission to a mental health treatment facility may be voluntary upon a written consent of a psychiatric patient, if capable of giving consent, or his guardian. A patient may leave if he so wishes, unless involuntary admission conditions apply to him.

Article 11: Emergency Admission

A. Physicians working in emergency departments in all hospitals shall have the authority to provisionally admit a psychiatric patient under emergency admission for observation and treatment purposes if the involuntary admission conditions set forth in Article 13 of this Law, excluding paragraph 3 of said Article, apply to said patient, subject to the following:



1. The period of emergency admission of a psychiatric patient does not exceed 72 hours from the time the patient is examined by the physician, and this shall be recorded in the medical record of the relevant psychiatric patient.
 2. The management of the relevant mental health treatment facility is notified of the type of admission and treatment using the form prepared for this purpose.
 3. The medical condition and type of admission is explained to the psychiatric patient if his condition so permits, or to his guardian if otherwise.
- B. Physicians making an emergency admission decision may revoke the same, and a psychiatrist may revoke an emergency admission decision prior to the expiry of the period stipulated in paragraph (A/1) of this Article, after examining the relevant patient.
- C. Upon expiry of the period stipulated in paragraph (A/1) of this Article, an emergency admission decision shall be automatically cancelled, unless the conditions for involuntary admission provided for in Article 13 of this Law apply.

Article 12

In the absence of a specialized psychiatrist or any other physician to assess the condition of a psychiatric patient, a psychologist, social worker, counselor, or psychiatric nurse may involuntarily detain said psychiatric patient in the hospital temporarily, in accordance with the following:

- a) The duration of involuntary temporary detention does not exceed eight hours, subject to the following:
 1. There is clear evidence, at the time of examination, that the person in question is suffering from a severe mental disorder, the symptoms of which pose actual or potential threat to the patient or others.
 2. No physician is available to examine the psychiatric patient at the time the emergency admission decision is made.
- b) The person making a temporary involuntary detention decision shall inform the physician on duty and the administration of the mental health treatment facility of the condition of the psychiatric patient as per procedures set forth in the Regulations; and
- c) The temporary involuntary detention period shall end upon the expiry of the period referred to in paragraph (a) of this Article, or upon a physician's evaluation of the psychiatric patient and his decision as to the action to be taken, in accordance with this Law.

Article 13: Involuntary Admission Conditions and Procedures

No person may be involuntarily admitted to a mental health treatment facility unless all of the following conditions are met:



1. There is clear evidence, at the time of examination, that the person in question is suffering from a severe mental disorder, the symptoms of which pose actual or potential threat to the patient or others.
2. Admission of a psychiatric patient to the mental health treatment facility is necessary for the patient's recovery, improvement, or control of the deterioration of his condition.
3. Two psychiatrists sign a form attesting to the satisfaction of the conditions set forth in paragraphs (1) and (2) of this Article, stating the health condition and justifications for involuntary admission.

Article 14: Duration of Involuntary Admission

- A. The duration of involuntary admission shall be 72 hours. If the justifications for admission persist as per the conditions stipulated in Article 13 of this Law, the duration of involuntary admission may, pursuant to a report attested by two psychiatrists, be extended to a period not exceeding 30 days, provided that justifications for such extension are stated in the report.
- B. The involuntary admission period stipulated in paragraph (A) of this Article may, pursuant to a detailed report attested by two psychiatrists, be extended to a period not exceeding 90 days for the purpose of completing the assessment and treatment of the patient.
- C. If the condition of a psychiatric patient requires admission to a mental health treatment facility for a period exceeding the period stipulated in paragraph (B) of this Article, said period may be extended up to 180 days pursuant to a detailed report signed by two psychiatrists providing justifications for such extension. Said report shall be submitted to the local supervisory board for mental health care for approval, amendment, or revocation, in sufficient time prior to the expiration of the period stipulated in paragraph (B) of this Article.
- D. In all cases where two psychiatrists decide to involuntarily admit a patient to a mental health treatment facility or extend the admission period thereof, said psychiatrists shall immediately notify the administration of the mental health treatment facility of such decision using the form prepared for such purpose.
- E. A psychiatric patient may appeal an involuntary admission decision or extension thereof before the local supervisory board for mental health care in writing, by telephone, or through his guardian or attorney-in-fact. Procedures for appeal shall be specified in the Regulations.
- F. Involuntary admission shall terminate once the justifications therefor cease to exist, even if the periods stipulated in this Article have not expired.

Article 15: Assessment Order by Judicial or Investigation Authorities

- A. The Minister of Health shall specify the government mental health treatment facilities responsible for assessing the mental condition of persons suspected of suffering from a mental illness or intellectual disability upon the request of judicial or investigation authorities as needed. The Minister shall set up forensic psychiatric committees in said facilities, each of which



- comprises at least three consultant psychiatrists of Saudi nationality whenever possible. The decision for forming each committee shall provide for substitute members of the same rank, appoint a secretary, and specify remunerations of its members. The Regulations shall specify committee work procedures. Said committees shall be recomposed every three years and their reports shall be approved by the mental health treatment facility.
- B. If the mental health treatment facility provided for in paragraph (A) of this Article receives a request from a judicial or investigation authority to assess the condition of a person accused of committing a crime and suspected of suffering from a mental illness or intellectual disability, such assessment shall be in accordance with the following:
1. The condition of a person accused of committing a crime who is suspected of suffering from a mental disorder or intellectual disability shall be assessed pursuant to a detailed report approved by the committee referred to in paragraph (A) of this Article, stating the mental condition of the accused person at the time of committing the crime, his mental condition at the time of assessment, the extent of his criminal responsibility, and the proposed treatment plan.
 2. A person accused of committing a crime who is suspected of suffering from a mental illness or intellectual disability shall be confined to the mental health treatment facility for the purpose of completing the assessment and the report, and he may not be released even on bail, except by the order of the entity requesting the assessment.
 3. A person accused of committing a crime who is suspected of suffering from a mental illness or intellectual disability shall be admitted to the mental health treatment facility stipulated in paragraph (A) of this Article within a period not exceeding seven days from the date of the request by the judicial or investigation authority.
 4. The condition of a person accused of committing a crime who is suspected of suffering from a mental illness or intellectual disability shall be assessed within a period not exceeding 30 days. Said period may be renewed upon the request of the committee referred to in paragraph (A) of this Article and the approval of the party requesting the assessment, as the case may be (the judge or a member of the Bureau of Investigation and Public Prosecution). The assessment shall be submitted to the requesting party within said period which may be extended up to 90 days. If the assessment requires a longer period, further extension of a period not exceeding 90 days may be granted and the local supervisory board for mental health care shall be notified accordingly. In all cases, extension shall be subject to the approval of the party requesting the assessment.
- C. Special sections shall be designated within the mental health treatment facilities provided for in paragraph (A) of this Article for the treatment of psychiatric patients who are accused or convicted. Mental health treatment facilities shall be responsible for medical services, while law enforcement agencies shall be responsible for security.



- D. The Regulations shall determine the procedures for coordination between judicial and investigation authorities, law enforcement agencies, and mental health treatment facilities in accordance with the provisions of this Law and the Criminal Procedures Law.

Article 16: Obligations of Mental Health Treatment Facilities upon Involuntary Admission

A mental health treatment facility shall:

1. verify the satisfaction of involuntary admission conditions and procedures provided for in Articles 13 and 14 of this Law;
2. notify the local supervisory board for mental health care of the names of involuntarily admitted patients within 48 business hours from the time of admission;
3. maintain a record of each patient's name, surname, age, nationality, distinctive features, identification number and date of issuance, admission and discharge dates, name of the person who brought him in, if any, and any other necessary information; and
4. allow members, representatives, and committees of the General Supervisory Board for Mental Health Care and local supervisory boards for mental health care to perform their supervisory functions as provided for in this Law in all departments of the treatment facilities.

Article 17: Involuntary Therapeutic Care

- A. Involuntary therapeutic care shall apply to persons suffering from mental disorders and are in need of therapeutic care, pursuant to a decision approved by two psychiatrists stating the justifications for imposing involuntary therapeutic care and the necessary treatment plan.
- B. Involuntary therapeutic care necessitated by the health condition of a psychiatric patient shall, without the consent or admission of said patient, be administered at outpatient clinics or his place of residence, and the local supervisory board for mental health care shall be notified of the same within 48 business hours from the time the decision to administer involuntary therapeutic care is made.
- C. If a psychiatric patient fails to follow the involuntary therapeutic care program, the mental health treatment facility may request the local supervisory board for mental health care to take necessary action to administer involuntary therapeutic care to the patient.
- D. In order to conduct involuntary therapeutic care in the place of residence of the psychiatric patient under the supervision of a specialist psychiatrist, the psychiatric patient or his guardian, as the case may be, shall comply with the instructions of the treatment team.
- E. If a psychiatric patient declines to receive involuntary therapeutic care, his case shall be reviewed by two psychiatrists and if the conditions stipulated in Article 13 of this Law apply, said psychiatrists shall submit a detailed



signed report to involuntarily admit said patient to the mental health treatment facility and the local supervisory board for mental health care shall be notified of the same.

- F. The Regulations shall specify the procedures for requests made by psychiatric patients receiving involuntary therapeutic care to transfer to another facility.
- G. Involuntary therapeutic care shall be for a maximum period of 180 days. Such period may be extended or renewed as required by the condition of the psychiatric patient.
- H. The patient, his guardian, or attorney-in-fact shall have the right, in accordance with the provisions of this Law, to object at any time to an involuntary therapeutic care decision before the local supervisory board for mental health care or the General Supervisory Board for Mental Health Care, as the case may be.
- I. The psychiatric patient, his guardian, or attorney-in-fact may request in writing the termination of involuntary therapeutic care. The mental health treatment facility shall respond within seven days from the date of receipt of such request. If the mental health treatment facility decides to continue treatment, the psychiatric patient, his guardian, or attorney-in-fact may appeal before the local supervisory board for mental health care.
- J. Involuntary therapeutic care may be terminated in the following cases:
 - 1. If the attending psychiatrist so decides, provided that a report on the condition of the patient and justifications for termination is submitted to the local supervisory board for mental health care.
 - 2. If the stipulated period expires without renewal or extension.
 - 3. If so determined by the local supervisory board for mental health care.

Article 18: Documenting Treatment Interventions

Members of the medical treatment team shall document in the psychiatric patient's file any treatment intervention, including electroconvulsive therapy and procedures thereof, as specified in the Regulations.

Article 19

If a psychiatric patient is determined to be in need for electroconvulsive therapy, an explicit written voluntary consent shall be obtained from the patient or his guardian, after explaining the nature of electroconvulsive therapy, its purpose, side effects, and available alternative treatments. The Regulations shall specify the necessary procedures to be followed when using electroconvulsive therapy.

Article 20: Technical Medical Committee at the Mental Health Treatment Facility

A technical medical committee shall be formed at every mental health treatment facility designated for hospitalization. Said committee shall comprise three



psychiatrists, one of whom at least shall be a consultant, and said committee shall attend to cases where the implementation of the treatment plan required for the patient is being obstructed and shall notify the local supervisory board for mental health care of any action taken in this respect. The Regulations shall provide necessary details.

Article 21: Psychiatric Patients' Rights Committee at the Mental Health Treatment Facility

At every mental health treatment facility designated for hospitalization, a psychiatric patients' rights committee shall be formed pursuant to a decision by the director of health affairs in the relevant province as follows:

1. A member from a non-government society concerned with patients' rights, Chairman.
2. The director of the mental health treatment facility or his deputy, Vice-Chairman.
3. A social worker from the mental health treatment facility, member.
4. A family member of one of the patients, member.

The committee shall be in charge of raising patients' awareness of their rights under this Law as well as protecting such rights. The committee shall receive and attend to complaints filed by patients or their families, and may refer such complaints to the local supervisory board for mental health care or competent authorities.

Article 22

In case no bed is available for a patient whose condition requires hospitalization at the mental health treatment facility, the attending physician shall notify the administration of said facility which shall, in turn, notify the director of health affairs in the province to provide what is necessary for the patient.

Article 23

If the treatment team determines that it is not in the psychiatric patient's best interest to return home or if the patient does not have one, said patient shall be referred to a psychiatric recovery facility depending on his age, gender and mental and social conditions, subject to the approval of the local supervisory board for mental health care.

Article 24

If an involuntarily admitted patient escapes from a mental health treatment facility or does not return after the end of a medical leave granted by the facility, the administration of said facility shall coordinate with law enforcement agencies to recommit him.



Article 25: Penalties

A. Without prejudice to any harsher penalty provided for in other laws, any person violating the provisions of this Law shall be subject to any of the following penalties:

1. Imprisonment for a period not exceeding two years and a fine not exceeding 200,000 riyals, or either penalty, for any practitioner at a mental health treatment facility who intentionally provides in his report false statements regarding the mental condition of any person for the purpose of admitting said person to or releasing him from hospital, as well as any person who detains or causes the detention of any person as a mental patient in places and conditions other than those provided for under this Law. The judge may increase the imprisonment beyond the maximum term and not exceeding the period for which the victim had been detained, if the victim is proven to have been detained for a period exceeding two years.
2. Imprisonment for a period not exceeding one year and a fine not exceeding 25,000 riyals, or either penalty, for any person assigned to guard, treat, or nurse a psychiatric patient and abuses or neglects said patient in a manner that would inflict pain or harm thereon, or violates the provisions of Article 9(4) of this Law. If abuse results in the illness or physical injury of the psychiatric patient, the penalty shall be imprisonment for a period not exceeding three years.
3. Imprisonment for a period not exceeding six months and a fine not exceeding 50,000 riyals, or either penalty, for any person who facilitates or assists with the flight of an involuntarily admitted patient; refuses to provide information needed by the supervisory boards or their inspectors to perform their duties; obstructs authorized inspection carried out by the supervisory boards in accordance with this Law; or falsely and in bad faith informs the competent authority that a certain person suffers from mental illness.
4. Imprisonment for a period not exceeding three months and a fine not exceeding 50,000 riyals, or either penalty, for any person who discloses confidential information of a psychiatric patient contrary to the provisions of this Law.
5. A fine not exceeding 50,000 riyals for any person violating any of the provisions of Article 9(1, 2, 3, and 5-17), Article 11(A/2 and A/3), Article 12(B), Article (16), and Article (20) of this Law.

B. Imposition of the penalties provided for in this Law shall not preclude victims from initiating disciplinary or civil legal action.

Article 26

A. The Bureau of Investigation and Public Prosecution shall investigate and prosecute violations provided for in Article 25 of this Law before judicial authorities.



B. The competent court shall impose the penalties provided for in this Law.

Article 27

Employees appointed by the Minister of Health to record violations provided for in this Law shall have the capacity of preliminary investigation officers as provided for in the Criminal Procedures Law.

Article 28

The Minister of Health shall, in coordination with relevant agencies, regulate the following:

- a) Procedures and controls aimed to promote mental health care and prevent mental disorders in society.
- b) Rules and procedures for practicing psychiatry at mental health treatment facilities.

Article 29

The Minister of Health shall, within 90 days from the date of promulgation of this Law, issue the Implementing Regulations thereof. Said Regulations shall enter into force as of the date this Law enters into force.

Article 30

This Law shall enter into force 90 days as of the date of its publication in the Official Gazette.