



Public – To be published on the Trust external website

Patients' correspondence – section 134 Mental Health Act 1983

Ref: MHA-0001-v5.3

Status: Approved

Document Type: Procedure

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1 Introduction

This document provides direction and guidance about how post from a detained patient to a particular recipient can be withheld from posting when that recipient has requested so in writing.

This policy supports the trust in the delivery of Our Journey to Change and our ambition to create safe and personalised care. It helps us deliver our strategic goals as follows:

- This policy supports the trust to co-create a great experience for all patients, carers and families by ensuring the Trust meets its obligations to make sure patients subject to the Mental Health Act 1983 (MHA) are given and understand the relevant information regarding correspondence and helping to provide a workplace that is fit for purpose.

2 Purpose

Following this procedure will help the Trust to:

- Comply with the requirements of section 134 of the Mental Health Act 1983

3 Who this procedure applies to



Section 134 only applies to patients detained under the Mental Health Act. This does not include supervised community treatment patients (CTO patients) who have been recalled to hospital.



Only the High Security Psychiatric Hospitals (Ashworth, Broadmoor and Rampton) have the power to withhold incoming post, or to withhold outgoing post without the written request of the recipient.

These provisions are not included in this procedure.

This procedure follows the Trust values by respecting the rights of individuals.

4 Related documents

n/a

5 Procedure

5.1 When a person does not wish to receive post from a detained patient

Action:	Notes:
Letter received requesting that mail from patient be withheld from posting.	<ul style="list-style-type: none"> Request must be in writing Request can be made to: <ul style="list-style-type: none"> Managers of hospital Patient's responsible clinician Secretary of State for Health Secretary of State for Justice
MHL Department informed	<ul style="list-style-type: none"> Request recorded in patient's MHA record. Letter sent to patient informing them that request has been made and copied to ward. Letter sent to person who has requested not to receive mail to confirm.
Ward informed	<ul style="list-style-type: none"> Request recorded in patient's notes on the electronic patient record. Information Sharing Alert created, and safety summary/plan updated to include the name of person who does not wish to receive mail.

5.2 Withholding the mail

Action:	Notes:
Letter is withheld from posting	<ul style="list-style-type: none"> Mail should be left unopened
Letter kept on the ward	<ul style="list-style-type: none"> Letters held by ward and returned to patient when they are discharged from detention

6 Definitions

Term	Definition
Post or Postal Packet	Defined by the Postal Services Act 2000 as a letter, parcel, packet or other item transmissible by post.

7 How this procedure will be implemented

- This procedure will be published on the Trust's intranet and external website.
- Line managers will disseminate this procedure to all Trust employees through a line management briefing.

7.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
Clinical staff with a professional registration	MHL level 2 e-learning	3 hours	Every 2 years
Clinical staff without a professional registration	MHL level 1 e-learning	3 hours	Every 2 years

8 How the implementation of this procedure will be monitored

There are no auditable standards or key performance indicators associated with this procedure. Any notifications with the request to withhold mail will be kept on file in the MHL department.

9 References

[Mental Health Act code of Practice](#)

10 Document control (external)

To be recorded on the policy register by Policy Coordinator

Date of approval:	13 January 2025
Next review date:	13 January 2028
This document replaces:	MHA-0001-v5 Patients' correspondence – section 134 MHA 1983 procedure
This document was approved by:	Mental Health Legislation Committee
This document was approved:	13 January 2025
An equality analysis was completed on this document on:	19 December 2024
Document type	Public
FOI Clause (Private documents only)	N/A

Change record

Version	Date	Amendment details	Status
5	Jun 2018	Reviewed June 2018, Trust logo updated, no changes to content required. Equality Assessment updated.	Withdrawn
5	08 July 2020	Links to inTouch removed. Review date extended by six months to 12 Jan 2022.	Withdrawn
5	23 Aug 2021	Review dated extended to 23 Feb 2022	Withdrawn
5.1	02 Dec 2021	Three yearly review. Changed to new template and included Our Journey to change.	Withdrawn
5.2	31 Aug 2023	Minor wording changes In section 4.1 "Paris" changed to "Electronic Patient Record" and "MHA Department" changed to "MHL Department"	Withdrawn
5.3	13 Jan 2025	Three yearly review with minor changes. Flowcharts changed to tables for accessibility. Equality Analysis Template Updated. Terminology updated to reflect changes in CITO.	Published

Appendix 1 - Equality Impact Assessment Screening Form

Please note: The [Equality Impact Assessment Policy](#) and [Equality Impact Assessment Guidance](#) can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	Mental Health Legislation
Title	Patients' correspondence – section 134 Mental Health Act 1983
Type	Procedure
Geographical area covered	Trust wide
Aims and objectives	<p>To ensure that mail is withheld from posting where a person has requested not to receive mail from a detained patient</p> <p>To ensure that the Trust meets its obligations under section 134 Mental Health Act 1983</p>
Start date of Equality Analysis Screening	October 2024
End date of Equality Analysis Screening	19 December 2024

Section 2	Impacts
Who does the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	<p>Ensures that the obligations placed on TEWV by the Mental Health Act 1983 are met</p> <p>Protects members of the public who do not wish to receive mail from a particular patient detained under the MHA</p>
Will the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?	<ul style="list-style-type: none"> • Race (including Gypsy and Traveller) NO • Disability (includes physical, learning, mental health, sensory and medical disabilities) NO • Sex (Men and women) NO • Gender reassignment (Transgender and gender identity) NO • Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO • Age (includes, young people, older people – people of all ages) NO • Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO • Pregnancy and Maternity (includes pregnancy, women / people who are breastfeeding, women / people accessing perinatal services, women / people on maternity leave) NO • Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO • Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) NO • Human Rights Implications NO (Human Rights - easy read)
Describe any negative impacts / Human Rights Implications	
Describe any positive impacts / Human Rights Implications	Following this procedure ensures TEWV staff are acting in concordance with the MHA 1983

Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	Mental Health Act 1983 (MHA) Mental Health Act Code of Practice
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Based on legislation and code of practice which undergoes extensive equality impact analysis
If you answered Yes above, describe the engagement and involvement that has taken place	The Trust's Equality, Diversity and Human Rights Team were contacted.
If you answered No above, describe future plans that you may have to engage and involve people from different groups	

Section 4	Training needs
As part of this equality impact assessment have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	N/A
Describe any training needs for patients	N/A
Describe any training needs for contractors or other outside agencies	N/A

Check the information you have provided and ensure additional evidence can be provided if asked.

Appendix 2 – Approval checklist

To be completed by lead and attached to any document which guides practice when submitted to the appropriate committee/group for consideration and approval.

Title of document being reviewed:	Yes / No / Not applicable	Comments
1. Title		
Is the title clear and unambiguous?	Y	
Is it clear whether the document is a guideline, policy, protocol or standard?	Y	
2. Rationale		
Are reasons for development of the document stated?	Y	
3. Development Process		
Are people involved in the development identified?	Y	
Has relevant expertise has been sought/used?	Y	
Is there evidence of consultation with stakeholders and users?	Y	
Have any related documents or documents that are impacted by this change been identified and updated?	Y	
4. Content		
Is the objective of the document clear?	Y	
Is the target population clear and unambiguous?	Y	
Are the intended outcomes described?	Y	
Are the statements clear and unambiguous?	Y	
5. Evidence Base		
Is the type of evidence to support the document identified explicitly?	Y	
Are key references cited?	Y	
Are supporting documents referenced?	Y	
6. Training		
Have training needs been considered?	Y	
Are training needs included in the document?	Y	
7. Implementation and monitoring		

Does the document identify how it will be implemented and monitored?	Y	
8. Equality analysis		
Has an equality analysis been completed for the document?	Y	Sent on 20/11/2024
Have Equality and Diversity reviewed and approved the equality analysis?	Y	AH 19 Dec 2024
9. Approval		
Does the document identify which committee/group will approve it?	Y	
10. Publication		
Has the policy been reviewed for harm?	Y	
Does the document identify whether it is private or public?	Y	
If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	N/A	
11. Accessibility (See intranet accessibility page for more information)		
Have you run the Microsoft Word Accessibility Checker? (Under the review tab, 'check accessibility'. You must remove all errors)	Y	
Do all pictures and tables have meaningful alternative text?	Y	
Do all hyperlinks have a meaningful description? (do not use something generic like 'click here')	Y	