

Guide to CTO Treatment Plan Template for Eating Disorders

The Treatment Plan Template was devised in response to a marked increase in CTO applications for this cohort. The treatment needs of consumers with severe eating disorders are often different to treatment for other mental illnesses, hence the need for the Template.

Applicants are encouraged to adopt the Template as a guide to drafting conditions in treatment plans. This is to ensure that they conform to the legal requirements for making CTOs under the Mental Health Act ('the Act').

Section 54 (a) of the Act requires any obligations placed on a consumer to be in the nature of *...treatment, counselling, management, rehabilitation and other services...provided to implement the Community Treatment Order.*

If it is thought that a consumer should follow the treatment or management plan developed by a community mental health team this is a "service". Adequate dietary intake is a critical plank of treatment for consumers with anorexia and developing a dietary treatment plan is a service.

Therefore, if it is proposed that a consumer follow a particular dietary plan the obligation must be expressed as a plan that is endorsed by a service provider. If no dietician is available, a general practitioner or other delegated service provider may decide upon the dietary treatment plan. The plan may include eating a certain level of kilojoules and limiting the ways in which those kilojoules are expended. In the Template it is expressed as follows:

...follow the meal plan prescribed by their dietician/case manager/GP (and endorsed by the treating team).

Whilst a requirement that a consumer remain above a certain weight is not "*treatment, counselling, management, rehabilitation or other service*", a fall in weight may indicate of non-adherence with a dietary plan. It is therefore appropriate for a CTO to indicate the weight loss which might be indicative of non-compliance. Usually it will be appropriate to indicate that non-adherence to an eating plan is indicated by a consumer's fall in weight or abnormal test results.

In the interests of transparency, a treatment plan may indicate the weight loss or adverse test results which might be indicative of non-adherence. The Template expresses this as follows:

NOTE: Failure to comply with these obligation(s) will be measured by

- 1. [Client]'s weight falling below [insert weight - the treating team including the dietician, medical officer and therapist should determine the weight at which medical and mental health safety can usually be maintained outside of hospital],*
- 2. Rising abnormality in blood electrolytes or vital observations (blood pressure, heart rate, temperature) that places [Client] at medical risk that the treating doctor considers cannot be managed safely within the community.*

It would be a matter for the treating team to determine if refusal to adhere to a condition in the treatment plan should result in a breach of the order. Not all breaches will automatically lead to a breach order as the non-adherence must result in "*a significant risk of deterioration in the mental or physical condition*" of the person under s 58. Non adherence to a condition may provide the treating team with an opportunity to increase their contact with a consumer and/or adjust the treatment.