

## **POLICIES**

**POLICIES for Treatment of Mental Disorders.** The project coordinator is Dr Allan Mawdsley. The version can be amended by consent. If you wish to contribute to the project, please email [admin@mhyfvic.org](mailto:admin@mhyfvic.org)

### **[6] Standard Treatment**

- a) Outpatient psychotherapies, medication and procedures
- b) Inpatient psychotherapies, medication and procedures
- c) Ancillary support services

### **[6 a ] Outpatient psychotherapies, medication and procedures**

MHYFVic advocates that Specialist mental health services should offer a range of therapeutic programs for disabling mental health problems in the community. All disorders in childhood require wholistic management involving caregivers. Service provision, clinical research and training should be integrated in the Tier Three facilities, with the practice guidelines published by those services implemented at all levels of their service delivery facilities. The baseline standard of case assessment required is that outlined in PE4 (and PE2a(i) for infant mental health)

#### **POL6a (i) Organic brain disorders**

MHYFVic advocates that Specialist mental health services should offer treatment programs for children with organic brain disorders. Such services would require collaboration with paediatric and neurology specialists and include ongoing collaboration with families and consultative support to other agencies involved in the management plan. It would also include lifestyle and social components.

[\[To go to Best Practice Model BP6a close this file and go via Best Practice Index\]](#)

[\[To go to Policy POL6a close this file and go via Policy Index\]](#)

**Last updated 10/2/2022**