

## **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 (vi) Physiological Disorders**

MHYFVic advocates that Specialist mental health services should offer multidisciplinary assessment and treatment programs for children with physiological disorders including:

- Eating disorders (Anorexia and Bulimia Nervosa),
- Sleep disorders,
- Toileting disorders (enuresis, encopresis),
- Sexual disorders (preliminary diagnosis only for Gender Identity Disturbance, then referral to specific specialist program such as Royal Children's Hospital),
- Attentional disorders (ADHD),
- Motor disorders (tics, stuttering).

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