COMMUNITY TREATMENT ORDER PATHWAY

WHO CAN BE DISCHARGED ONTO CTO?
Only patients detained for treatment under Section 3 of the Act, or unrestricted Part 3 patients can be considered for CTO.

CTO CRITERIA
- The patient is suffering from a mental disorder of a nature or degree which makes it appropriate for them to receive medical treatment;
- It is necessary for the patient’s health or safety or for the protection of others that the patient should receive such treatment;
- Subject to the patient being liable to be recalled, such treatment can be provided without the patient continuing to be detained in a hospital;
- It is necessary that the Responsible Clinician should be able to exercise the power under Section 17E(1) of the Act to recall the patient to hospital; and
- Appropriate medical treatment is available for the patient.

MAKING THE CTO
Once the Responsible Clinician and the Approved Mental Health Professional agree that the patient should be discharged onto CTO, they must complete the Form CTO1, Section 17A. Once this form is completed in its entirety the CTO is active as soon as the patient leaves hospital.

CONDITIONS
The CTO must include conditions, which the patient is required to comply with while on CTO. There are two mandatory conditions, the service user must make themselves available when either of the following applies:
- When needed for consideration of extension of the CTO; and
- If necessary, to allow a SOAD to provide a Part 4A certificate authorising treatment.
The above conditions are written on the Form CTO1 form under Section 17B (2).

Other conditions -
The Responsible Clinician with the AMHP’s agreement can set other conditions, which they think are necessary or appropriate to:
- Ensure that the patient receives medical treatment/nursing care for mental disorder;
- Prevent a risk or harm to the patient’s health or safety;
- Protect other people.

VARIATION AND SUSPENSION OF CONDITIONS
The RC can vary or suspend any conditions, without the agreement of the AMHP at any time during the period of the CTO. Any variation or suspension of conditions must be completed on Form CTO2. The COP 29.40 gives recommendations regarding the variation of conditions.

RECALL TO HOSPITAL
The Responsible Clinician may recall a patient on a CTO to hospital if they fail to comply with the conditions of their CTO, or if the patient requires treatment. The Responsible Clinician must complete a Form CTO3, Section 17E and the recall lasts only for 72 hours. The COP gives guidance on recall, paragraph 29.52 onwards.

If a service user is recalled to hospital, Form CTO4 must be completed by clinical staff once the service user has been recalled and this should be sent to Mental Health Act Administrator. As soon as the patient is recalled and is admitted to a ward they are subject to consent to the treatment (if they had met the 3 month period prior to going on the CTO) so will require a T2 or a Section 62.

If the CTO is not revoked
If the CTO is not revoked after 72 hours the patient is free to leave hospital and continues on the CTO as before, complying with the conditions set e.g. being monitored in the community by the Care Coordinator or a member of the team.

Revoking the CTO
If the patient requires longer than 72 hours in hospital, the Responsible Clinician must consider revoking the CTO. The CTO can also be revoked if the patient no longer meets the criteria. To revoke the CTO, Form CTO5 must be completed.

After revoking a CTO
If the CTO is revoked the patient is automatically placed back on their original detaining Section in hospital. The patient’s Section 3 or Section 37 then starts again. The service user, once their CTO is revoked, is then referred automatically to the MHRT.