

Bulletin

CMI Business Rules: Issue 27, February 2018

Recording ECT Treatment for adult voluntary persons authorised by Mental Health Tribunal

Purpose

- To outline the interim process for public Mental Health Services recording ECT course and treatment data within CMI/ODS, when consented by a medical treatment decision maker, and authorised by the Mental Health Tribunal.
- To advise that work is underway for CMI/ODS to align with the Medical Treatment Planning and Decisions Act 2016

Overview

The *Medical Treatment Planning and Decisions Act 2016* (the MTPDA) was passed by Parliament on 24 November 2016, enshrining advance care directives in law. Commencement is on 12 March 2018, allowing health services, health practitioners, and the public to prepare for the new laws.

Changes made to the Mental Health Act 2014 (MHA) by the Medical Treatment Planning and Decisions Act 2016 (the MTPDA) effective on 12 March 2018 create a new, alternative pathway to consent to ECT for adults who lack decision making capacity and are not already compulsory patients under the MHA.

The new provisions amend the consent process for the administration of ECT in a public or private setting to an adult who lacks the capacity to consent. The provisions permit ECT to be administered, with the approval of the Mental Health Tribunal, on a voluntary basis under specific circumstances, as outlined within Chief Psychiatrist's Clinical Practice Advisory Notice on 09/02/2018.

Interim ECT Data Reporting solution for MTPDA

From 12/03/2018, a voluntary person's Medical Treatment Decision Maker (MTDM) will be able to consent to a course of electroconvulsive treatment (ECT). The Mental Health Tribunal (MHT) will then need to authorise ECT.

The "MHT Hearing request" function of the CMI ECT module will not be ready for MTPDA amendments or for the MHT to receive ECT hearing requests for voluntary adults through CMI/ODS data entry. The application process will occur using the "MHA 132A Application for ECT - Voluntary adult person without capacity to consent" form being manually submitted to the MHT.

ECT course information can be entered into CMI/ODS for these ECT instances if the MHT have granted the MHA132A ECT application.

To record the ECT course and treatments within CMI, ECT Course information will need to be entered into CMI with the following settings:-

- Client type = Voluntary
- *Capacity = Yes
- *Consent = Yes

*It is acknowledged that under the MHA the MTDM can only consent to ECT on behalf of the client, when the client does not have capacity to consent. However, the CMI/ODS will not permit recording of ECT Courses for voluntary clients without capacity. This limitation will be addressed in a future update to the CMI/ODS.

In these instances ECT course detail, including duration, number of treatments, course start date, and course end date must be entered into CMI per MHT ECT Order documentation: MHT40 ECT Determination and/or MHT2 ECT Order.

Ending a course of ECT

If the client regains capacity to consent during an ECT course granted by the MHT with MTDM consent, than that course must be terminated in CMI, with the termination reason as:-

- Client regained capacity and consents to ECT OR
- Client regained capacity and does not consent OR

The ECT course must also end where a Medical Treatment Decision Maker withdraws consent. In this instance, MTDM must be used as termination reason within CMI:-

- Medical Treatment Decision Maker consent withdrawn.

Future ECT Data Reporting solution for MTPDA

Further instructions will be communicated when the CMI ECT module's "MHT Hearing request" function is updated to support the changes to the MHA as a result of the MTPDA.

For More Information

For any queries relating to data reporting please email: MHDReporting@dhhs.vic.gov.au

To receive this publication in an accessible format email MHDReporting@dhhs.vic.gov.au

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