

<b>Royal Children's Hospital</b>	<b>POLICY:</b>	<b>Policy No: GHC 0512/9212</b>
<b>GACE Treatment Plan Policy</b>		<b>Review Date: February 2015</b>
<b>Gatehouse</b>		<b>Next Review Date: February 2016</b>
<b>(for the Assessment &amp; Treatment of Child Abuse)</b>		<b>Page 1 of 2</b>

## 1. Policy statement

The Gatehouse Centre has a commitment to the provision of quality services to all Gatehouse Centre clients. This includes ensuring that our clinical practices –

- hold the clients (children, young people and families) at the centre of our provision of care.
- Are inclusive and respectful of ethnicity, gender and religious affiliations
- Are informed by best practice approaches
- Occur in line with best interest principles
- Are carried out in keeping with the professional ethics and codes of conduct of relevant professional bodies and associations and the RCH.

## 2. Persons affected

All Gatehouse Centre Staff

## 3. Responsibilities

### 3.1 Internal Processes

- At the point of referral, Gatehouse Centre staff will provide information to families which clearly outlines the two phases of engagement, namely assessment and treatment and the timelines associated with these (see Information packs)
- Clients/Families are engaged in developing goals and recommendations for the treatment phase based on systemically informed, formulation driven clinical assessments; the outcome of which is clearly articulated and discussed with the family.
- Interpreters will be organized when required and as agreed to by the family
- Agreed upon goals & recommendations for treatment are written up as a treatment plan. These goals should be observable, achievable and able to be monitored for change/ongoing relevance.
- Treatment plans/progress should be evaluated at 3, 6 and 12 month intervals with the client/family to determine progress, relevance and to guide decisions as to whether treatment continues as is, treatment continues with new/adjusted goals, treatment continues but with another clinician/agency, or whether a closure plan is developed and implemented.
- 3, 6 and 12 month reviews should be documented on the relevant proforma and signed off by clinician and client/family.

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- Where treatment is transferred to another Gatehouse clinician, a handover report is prepared and a handover process is negotiated with the client/family.
- At the end of treatment a closure report is completed.

### 3.2 Processes with External Agencies

- Gatehouse works collaboratively with Victoria Police, and DHS Child Protection in accordance to mandatory reporting guidelines to ensure the safety and protection of children, young people and families
- Gatehouse will notify DHS Child Protection of any information they become aware of during the course of clinical services that may impact upon the safety of children, young people and families for investigation.
- Gatehouse staff will make recommendations regarding the risk posed either to a child, young person and family or by a child, young person or family for implementation by a statutory agency.
- Clinical reports will be provided to Child protection on issue of a subpoena for court proceedings and after the contents of the Clinical report have been discussed with the family.
- Where treatment is to be transferred to another agency, the Gatehouse clinician will undertake all necessary steps to facilitate a referral and handover, including developing a transfer process that meets the needs of the client/family and the provision of a closure report.

## 4. Other relevant references

Gatehouse Report Writing policy  
Gatehouse Treatment policy  
RCH Interpreter and Non-English Speaking Services policy