



Community treatment orders

This resource explains what a community treatment order is, how it affects you and how you can change or end it. Applies to England and Wales.

Contents

Overview.....	2
Terms you need to know.....	2
About CTOs.....	6
Conditions.....	8
Ending a CTO.....	11
Recall to hospital.....	11
Mental Health Tribunal.....	13
Family members.....	15
Useful contacts.....	15

Overview

If you have been detained in hospital, you may be discharged on to a community treatment order (CTO).

Quick facts

- A CTO is an order made by your responsible clinician to give you supervised treatment in the community.
- This means you can be treated in the community for your mental health problem, instead of staying in hospital. But your responsible clinician can return you to hospital and give you immediate treatment if necessary.
- Conditions are added to the CTO which you have to follow, like having to live in a certain place or going to appointments for treatment.
- You can only be put on a CTO if you are under certain sections, and if certain criteria are met.
- A CTO lasts 5 months from the date of the order, and can be renewed by your responsible clinician.
- If you want to be discharged from your CTO, you can apply to the Mental Health Tribunal.
- While you are on a CTO, you have the right to get support from someone called an independent mental health advocate (IMHA).
- A family member, called your nearest relative, will have certain rights relating to your care and treatment, like finding out information about you and discharging you.

Please note

- This guide only covers CTO from the point of view of a person with a mental health problem.
- This guide applies to England and Wales.
- This guide contains general legal information, not legal advice. We recommend you get advice from a specialist legal adviser or solicitor who will help you with your specific situation and needs. See Useful contacts for more information.
- The legal information in this guide does not apply to children unless specifically stated.

Terms you need to know

Term	Meaning
Appropriate treatment	This means medical treatment for your mental health problem that is: <ul style="list-style-type: none">• suitable for you• available• takes into account the nature and degree of your mental health problem and your individual circumstances

<p>Approved clinician</p>	<p>A mental health professional who has certain responsibilities related to your healthcare. They are approved to do this by the Department of Health (England) or by the Welsh Ministers (Wales). Approved clinicians may be:</p> <ul style="list-style-type: none"> • doctors • psychologists • nurses • occupational therapists • social workers <p>Some decisions under the Mental Health Act, such as deciding on your medication or giving you permission to leave the ward or hospital, can only be taken by approved clinicians.</p>
<p>Approved mental health professional (AMHP)</p>	<p>AMHPs are mental health professionals who have been approved by a local social services authority to carry out duties under the Mental Health Act. They are responsible for coordinating your assessment and admission to hospital if you are sectioned.</p> <p>They may be:</p> <ul style="list-style-type: none"> • social workers • nurses • occupational therapists • psychologists
<p>Capacity</p>	<p>'Capacity' means the ability to understand information and make decisions about your life. Sometimes it can also mean the ability to communicate decisions about your life.</p> <p>If you do not understand the information and are unable to make a decision about your care, for example, you are said to lack capacity.</p>
<p>Care coordinator</p>	<p>A care coordinator is the main point of contact and support if you need ongoing mental health care.</p> <p>They keep in close contact with you while you receive mental health care and monitor how that care is delivered – particularly when you're outside of hospital.</p> <p>They are also responsible for carrying out an assessment to work out your health and social care needs under the care programme approach (CPA).</p> <p>A care coordinator could be any mental health professional, for example:</p> <ul style="list-style-type: none"> • nurse • social worker • other mental health worker <p>This is decided according to what is most appropriate for your situation.</p> <p>A care coordinator usually works as part of the community mental health team.</p>
<p>Community treatment order (CTO)</p>	<p>If you have been sectioned and treated in hospital under certain sections, your responsible clinician can apply for you to be put on a CTO. This means that you can be discharged from the section</p>

	<p>and leave hospital, but you might have to meet certain conditions such as:</p> <ul style="list-style-type: none"> • living in a certain place • going somewhere for medical treatment
Detained	<p>A person is detained if they are being kept in hospital under section and are not free to leave.</p>
Hospital managers (also known as Mental Health Act Managers)	<p>An independent team of people in a hospital who make sure that the requirements of the Mental Health Act are properly applied. They have certain important responsibilities and can make decisions related to your detention – for example, they can hear your application to be discharged from your section and decide whether or not to discharge you.</p>
Independent mental health advocate (IMHA)	<p>An IMHA is an advocate specially trained to help you find out your rights under the Mental Health Act 1983 and help you while you are detained. They can listen to what you want and speak for you. You have a right to an IMHA if you are:</p> <ul style="list-style-type: none"> • detained in hospital under a section of the Mental Health Act, but not if you are under sections 4, 5, 135 and 136 • under Mental Health Act guardianship, conditional discharge and community treatment orders (CTOs) • discussing having certain treatments, such as electroconvulsive therapy (ECT) <p>In Wales, voluntary patients can also have an IMHA. See our pages on advocacy, including information on IMHAs in England and IMHAs in Wales.</p>
Judicial review	<p>This is a type of court procedure where a judge reviews a public authority’s decision, policy, practice, act or failure to act, and decides whether it is lawful or not.</p> <p>If it is not lawful, the court may cancel the decision or action (‘quash’ it), and require the public authority to reconsider it, lawfully. The court can order the authority to do or not do something.</p>
Mental disorder	<p>When the Mental Health Act talks about someone with mental health problems and whether or not they should be sectioned, it often uses the term “mental disorder”. The Act defines this as “any disorder or disability of mind” (section 1).</p> <p>Mental disorder can include:</p> <ul style="list-style-type: none"> • any mental health problem normally diagnosed in psychiatry • learning disabilities, if the disability makes you act in a way which may seem "abnormally aggressive" or "seriously irresponsible"
Mental Health Act 1983 (MHA)	<p>This is a law that applies to England and Wales which allows people to be detained in hospital (sectioned) if they have a mental</p>

	illness and need treatment. You can only be kept in hospital if certain conditions are met.
Mental Health Act Administrator	The administrator works in the hospital and deals with collecting and keeping the section or CTO papers safe. They make sure that procedures are followed – like making sure you are given the right information and arranging hearings.
Mental Health Tribunal (MHT)	<p>This is a special court that deals with cases relating to the Mental Health Act 1983. The Tribunal decides whether you can be discharged from your section and can decide about suitable aftercare and make recommendations about matters such as hospital leave, transfer to another hospital, guardianship and CTOs.</p> <p>The court is made of a panel, which normally includes:</p> <ul style="list-style-type: none"> • a legally qualified chairperson • a 'lay person' who has appropriate experience and qualifications in the area of mental health • an independent psychiatrist, who will speak to you and examine you before the tribunal hearing in certain circumstances, and when you request to see them <p>Where you see a reference to the Mental Health Tribunal in this guide, it means:</p> <ul style="list-style-type: none"> • First Tier Tribunal (Mental Health), if you live in England, or • Mental Health Review Tribunal for Wales, if you live in Wales
Nearest relative	<p>This is a family member who has certain responsibilities and powers if you are detained in hospital under the Mental Health Act. These include the right to information and to discharge in some situations.</p> <p>The law sets out a list to decide who will be the 'nearest relative'. This can sometimes be changed.</p> <p>See our information on the nearest relative.</p>
Recalled	<p>This is a legal definition meaning that you can be returned to hospital for up to 72 hours. You can be recalled to any hospital if the responsible clinician thinks that:</p> <ul style="list-style-type: none"> • you need medical treatment in hospital for your mental disorder, and • there would be risk of harm to your health or safety or to others if you are not recalled <p>You must meet both criteria.</p>
Responsible clinician (RC)	<p>This is the approved clinician in charge of your care and treatment while you are sectioned under the Mental Health Act.</p> <p>Certain decisions, such as applying for someone who is sectioned to go onto a community treatment order (CTO), can only be taken by the responsible clinician.</p>

	All responsible clinicians must be approved clinicians . They do not have to be a doctor, but in practice many of them are.
Revocation	This is a legal definition which means that your CTO has ended and that you are detained under the original section , for example section 3.
Second opinion appointed doctors (SOAD)	This is a doctor who is called for a second opinion to decide whether they agree with your treatment if you are detained under the Mental Health Act 1983 . The Mental Health Act sets out when the hospital should get a second opinion.
Section	In this guide, being 'sectioned' means that you are kept in hospital under the Mental Health Act . There are different types of sections, each with different rules to keep you in hospital. The length of time that you can be kept in hospital depends on which section you are detained under. See our information on sectioning to find out more.

About CTOs

- [What is a CTO?](#)
- [When can a CTO be made?](#)
- [What are the criteria for making a CTO?](#)
- [How long does a CTO last?](#)
- [What support can I get when I am on a CTO?](#)
- [What is an independent mental health advocate?](#)

What is a CTO?

A community treatment order (CTO) is an order made by your [responsible clinician](#) to give you supervised treatment in the community.

This means you can be treated in the community for your mental health problem, instead of going to hospital, but your responsible clinician can [return you to hospital](#) and give you immediate treatment if necessary.

[Conditions are added](#) to the CTO which you have to follow. Sometimes, if you don't follow the conditions or you become unwell, you can be [recalled to hospital](#) and treated immediately.

While you are in the community, you will have a specialist care team:

- a [responsible clinician](#), who is responsible for the CTO and is generally known as your 'community RC', and
- a [care coordinator](#), who will be your main point of contact.

If you are subject to a CTO, the [Mental Health Act](#) describes you as a 'community patient'.

When can a CTO be made?

A [responsible clinician](#) can make a CTO if you are on a:

- section 3
- section 37 hospital order
- unrestricted transfer direction under section 47.

You cannot be put on a CTO if:

- you are on sections 2, 4 or 5
- you have been discharged. You must still be on the section to be able to be put on the CTO.

To find out more about different sections and what they mean, [see our information on sectioning](#).

What are the criteria for making a CTO?

You can only be put on a CTO if:

- you are suffering from a [mental disorder](#) for which you need to receive medical treatment
- you need to receive this medical treatment for your health or safety or for the protection of others
- you can receive this treatment without needing to be detained in hospital
- your responsible clinician needs to be able to recall you to hospital if necessary, **and**
- [appropriate medical treatment](#) is available for you in the community.

An [approved mental health professional](#) must agree in writing that these criteria are met, and they are appropriate for you.

Here is the form used to make a CTO: [form if you are in England](#), or [form if you are in Wales](#).

How long does a CTO last?

A CTO lasts 6 months from the date of the order, but it can be renewed.

Your [responsible clinician](#) will decide whether to renew your CTO. An [approved mental health professional](#) will also need to approve this before the CTO can be renewed.

You will need to have an appointment with your responsible clinician so that they can decide whether your CTO should be renewed – this is a condition of your CTO that you must follow.

If your responsible clinician decides to renew your CTO, they will need to fill out this form: [form for England](#) or [form for Wales](#).

What support can I get when I am on a CTO?

When you are discharged from hospital onto a CTO you are entitled to free aftercare services under [section 117 of the Mental Health Act 1983](#).

This means support in the community to help you with your mental health problems and to help you stay well and not have to return to hospital. You will not have to pay for this support.

For more information about section 117 aftercare services see our guide to [leaving hospital](#).

What is an independent mental health advocate?

If you are on a CTO, you have the right to get support from someone called an [independent mental health advocate](#) (IMHA).

An IMHA can help you in all sorts of ways. For example, they can:

- support you participating in meetings
- help you get relevant information
- look at alternative options for you
- help you challenge decisions.
-

Your [hospital managers](#) should give you information about your CTO rights and advocacy services. If they don't, you should ask the [Mental Health Act administrator](#) of the hospital or your [care coordinator](#).

See our guide to [advocacy](#) for more information on [IMHAs in England](#) and [IMHAs in Wales](#).



Example

Ali has been [detained](#) under section 3 for 9 months. He has a diagnosis of [bipolar disorder](#) which is managed by medication. He and his care team have agreed that he will be discharged onto a CTO next week, so that he can get supervised treatment in the community.

Conditions

- [What conditions can be attached to a CTO?](#)
- [Can the conditions be changed?](#)
- [What happens if I don't follow the conditions?](#)

What conditions can be attached to a CTO?

Every CTO will have these two conditions:

1. You must make yourself available to see your [responsible clinician](#) if your CTO is going to be renewed.
2. You must see the [second opinion appointed doctor](#) if you are asked to.

Other conditions can be added, but they will depend on your particular circumstances.

Examples of other conditions include:

- having to live in a certain place
- attending activities or therapy
- being tested for alcohol or illegal drugs
- attending appointments for treatment.

Any conditions that are added to your CTO must be agreed with your [approved mental health professional](#). The conditions must also be necessary or appropriate to make sure you get medical treatment, prevent risk to your health and safety or protect other people

It's important to know that any conditions that are added **must take your views into consideration**. This means that you should be involved in planning your discharge, deciding your conditions, and be given help to be able to follow them. This will help make sure that you are happy to follow your conditions.

A condition would be **unlawful** if it restricts your freedom more than if you were [sectioned](#).



Example

Eloise is being discharged onto a CTO with a condition that she must attend [cognitive behaviour therapy](#) at the local day centre.

The care team must therefore make sure that she is able to get to the day centre, for example, making sure that it is in walking distance, or she can apply for a bus pass so that she can get the bus.

It would be unreasonable for them to expect Eloise to pay for a taxi every day if there are no buses.

Can the conditions be changed?

Yes – your [responsible clinician](#) can change or temporarily stop your conditions. They do not need the [approved mental health professional's](#) agreement to do this.

You can ask your responsible clinician to change the conditions by writing or speaking to them, and telling them the reasons why you want to change the conditions. Any changes to your conditions will be recorded on [this form in England](#) or [this form in Wales](#).

If your responsible clinician doesn't want to change the conditions, you can take these steps:

- **Complain through the hospital's complaints procedure.** The hospital should be able to give you a copy of their complaints procedure if you ask them for it. If you are not happy with the response you can move on to the next step. You can also have a look at our guide on [Complaining about health and social care](#) for more information.
- **Complain to the Care Quality Commission.** To find out how to do this, see their [guidance on how to complain](#).
- **Apply for a judicial review.** If your responsible clinician doesn't change the condition, you might be able to apply to change them by [judicial review](#). This is a legal process and it is important that you get specialist legal advice. (See [Useful contacts](#) for more information).

What happens if I don't follow the conditions?

If you don't follow the conditions, your [responsible clinician](#) may:

- change the conditions or the support you receive if there is a problem with them, or
- return you to hospital

You cannot be [recalled](#) just because you don't agree to medical treatment. As long as you have [capacity](#) to consent to treatment, you can only be given treatment if you consent to it. But there are different rules if you are recalled to hospital or do not have capacity. (See our page on [recall to hospital](#) to find out more.)



Example

Marco is on a CTO with a condition that he goes to hospital to take his medication. He has been suffering from side effects from the medication so he doesn't want to take it anymore.

Marco's responsible clinician can't recall him just because he refuses to take the medication. But if Marco doesn't take his medication, he may become unwell, and in this situation his responsible clinician may choose to recall him.

Instead, Marco goes to the hospital and speaks to his responsible clinician about changing his medication.

When will a CTO end?

If your CTO comes to an end, this means that you will no longer have conditions you must follow, and you cannot be [recalled](#) to hospital.

Your CTO can end in a number of different ways:

- **Your CTO expires.** This is where your CTO expires before it is renewed.
- **Your CTO is revoked.** If you are recalled to hospital and your CTO is [revoked](#), the CTO will end and you will be on the [section 3](#) you started on. This is because your [responsible clinician](#) thinks that you meet the criteria to be detained in hospital. (See our page on [recall to hospital](#) for more information.)
- **Your responsible clinician discharges you.** Your responsible clinician can end your CTO if [the legal reasons for being on it](#) no longer apply.
- **Apply to the Mental Health Tribunal to be discharged.** See our page on the [Mental Health Tribunal](#) for more information.
- **A hospital managers' hearing discharges you.** Ask your [hospital managers](#) to consider discharging you. You can do this by asking for a meeting with the hospital managers.
- **Your nearest relative discharges you.** A family member called your [nearest relative](#) can ask for you to be discharged from your CTO. (See our page on [family members](#) for more information.)

Recall to hospital

- [When can I be recalled to hospital?](#)
- [What happens if I am recalled to hospital?](#)

When can I be recalled to hospital?

You can be [recalled](#) to any hospital if your [responsible clinician](#) thinks that:

- you need medical treatment in hospital for your [mental disorder](#), and
- there would be risk of harm to your health or safety or to others if you are not recalled.

You can only be recalled if you meet both criteria. For example, you cannot be recalled just because you stop taking your medication. But if you stop taking your medication, and your responsible clinician thinks that you will get unwell, they can recall you.

Your responsible clinician can also recall you if you don't follow the [two conditions](#) that are attached to every CTO.



Example

Dionne has a diagnosis of bipolar disorder and a condition of the CTO is to let the community psychiatric nurse into her house to give her medication.

Dionne decides that she is better and doesn't need her medication so she doesn't let her community psychiatric nurse into the house. She is not seen by her community psychiatric nurse or anyone for two weeks and they are worried that she is unwell. Her [responsible clinician](#) therefore decides to recall her.

What happens if I am recalled to hospital?

If you are [recalled](#) to hospital, firstly you must be given notice in writing. This can either be sent to you in the post or be given to you in person. Here is the form that would be used: [form for England](#) or [form for Wales](#).

You can either go to the hospital yourself or you could be taken to hospital by the police or ambulance. You can also ask that someone comes with you.

Once you are back in hospital, they will complete a form: see the [form for England](#) or [form for Wales](#). This makes a note of the time your detention started.

You can be kept in hospital for up to **72 hours**. Your [responsible clinician](#) will see you and decide what the next steps are. You can be forced to have treatment if your responsible clinician thinks that you need it. Your responsible clinician can then decide to either release you back to the community on the CTO or decide that you need to stay in hospital.

If you need to stay in hospital, your CTO will be revoked and you will be [detained](#) on your original [section](#). An [approved mental health professional](#) will need to agree to this and a form will be completed: see [form for England](#) or [form for Wales](#).

[See our information on sectioning](#) to find out about what happens when you are detained in hospital.

Mental Health Tribunal

- [How can I apply to be discharged?](#)
- [When will I be referred to the Mental Health Tribunal?](#)

How can I apply to be discharged?

If you want to be discharged from your CTO, you can apply to the [Mental Health Tribunal](#). The Tribunal cannot look at the conditions of your CTO – it will only look at how you are now and whether you should still be on your CTO or discharged from it. If you want help through this process, you can get [support from an independent mental health advocate](#) (IMHA).

When exactly you can apply will depend on what kind of section you are on:

Section 3

If	When can I apply to be discharged?
you are on a CTO under section 3	Within the first 6 months from the date that the CTO was made.
your CTO is renewed	During each period of renewal (once in the second 6 months and annually after that).
your CTO is revoked	Within 6 months starting with the day the CTO was revoked.

If you apply for a Tribunal whilst detained under section 3 and are then put on a CTO, the Tribunal will consider whether you meet the criteria for a CTO instead of the section 3. You will not lose any right to apply for a further hearing.

Section 37

If	When can I apply to be discharged?
you are on a CTO after detention under section 37	You cannot apply for a Tribunal within the first 6 months of the date of the hospital order being made.
your CTO is renewed	During each period of renewal (once in the second 6 months and annually after that).
your CTO is revoked	Within 6 months starting with the day the CTO was revoked. You cannot apply for a Tribunal within the first 6 months of the date of the hospital order being made.

Section 47

If	When can I apply to be discharged?
your restriction order has lapsed and you are a section 47 patient (section 37N), who is then placed on a CTO.	Within the first 6 months.
your CTO is renewed	During each period of renewal (once in the second 6 months and annually after that).
your CTO is revoked	Within 6 months starting with the day the CTO was revoked.

Legal aid

You will be able to get legal aid to pay for a solicitor to help you with your appeal, and during the hearing. Your savings or property will not have to be assessed for you to get this help – it is your right to have legal aid for the Tribunal, no matter what money you have coming in or if you own a house or flat.

When will I be referred to the Mental Health Tribunal?

The managers of the hospital responsible for your care must refer you to the [Mental Health Tribunal](#) at certain times:

If	When will I be referred to the Mental Health Tribunal?
your CTO is revoked and you have to go back to hospital under your original section	As soon as possible.
you are admitted under a section 2 or 3 , and there has not been a Tribunal application or reference	6 months from the date you are admitted. For more information about your rights when you are admitted under a section 2 or 3, see our pages on sectioning .
it has been 3 years since the last time the Tribunal has considered your case	3 years after the last time the Tribunal has considered your case.
you are under 18 years old and it has been 1 year since the last time the Tribunal has considered your case	1 year after the last time the Tribunal has considered your case.

You will still have a Mental Health Tribunal if you have a change in status. For example, if you have been referred to a Mental Health Tribunal because your CTO is revoked and you are then put under another CTO right before the hearing, the hearing will go ahead.

Can family members be involved?

Yes – under the [Mental Health Act](#), a family member called your [nearest relative](#) will have certain powers related to your care.

The Mental Health Act says that your nearest relative has the right to:

- be given information about you
- ask for an [independent mental health advocate](#) to see you
- discharge you. To do this, your nearest relative will need to write to the [hospital managers](#) to discharge your CTO, giving them at least 72 hours' notice in writing. If your [responsible clinician](#) doesn't object, your CTO will end once the 72 hours have passed. If your responsible clinician does object, they can make a report to the hospital managers that, in their view, you would act in a way that would be dangerous to yourself or others before the 72 hours are up.

To find out more about who your nearest relative is and what their rights are, [see our information on the nearest relative](#).

Useful contacts

Civil Legal Advice

0845 345 4345

gov.uk/civil-legal-advice

The Civil Legal Advice can tell you if you're eligible for legal aid and can give you free and confidential legal advice in England and Wales.

Care Quality Commission (CQC)

03000 616161 – press '1' to speak to the mental health team

enquiries@cqc.org.uk

cqc.org.uk

For complaints about anything that may have happened during your time in hospital under section (in England).

The Law Society

020 7242 1222 (England)

029 2064 5254 (Wales)

lawsociety.org.uk

The Law Society provides details of solicitors you can get in touch with for specialist legal advice.

Where can I get support?

Local Mind

Local Minds support over 280,000 people across England and Wales. Their services include supported housing, crisis helplines, drop-in centres, employment and training schemes, counselling and befriending. They may be able to help you find advocacy services in your area.

Find your local Mind [here](#).

Find an advocate

An advocate is a person who can both listen to you and speak for you in times of need. Having an advocate be helpful in situations where you are finding it difficult to make your views known, or to make people listen to them and take them into account.

For information on advocacy services and groups in your area, you could start by contacting the [Mind Legal Line](#) and your [local Mind](#). You can also contact the [Patient Advice Liaison Service \(PALS\)](#) in England, or the [Community Health Council](#) in Wales.

Read more about [how advocacy might help you](#).

© Mind September 2017

To be revised in 2019.

References are available on request.

If you require this information in Word document format for compatibility with screen readers, please email: publications@mind.org.uk