

**IN THE SUPERIOR COURT OF THE STATE OF ARIZONA
IN AND FOR THE COUNTY OF _____**

In the Matter of:

MH-

OUTPATIENT TREATMENT PLAN

DOB:
COT Date:

- Outpatient Court Ordered Treatment Plan
- Revised Court Ordered Outpatient Treatment Plan

THIS COURT ORDER AS FOLLOWS:

- 1.) **Residence:** The member will reside at the proposed residence: _____, _____, Arizona 8____. Any changes in residence will be determined by the medical director based on clinical appropriateness. This location is:
 Individual's home Home of a friend Home of a family member Shelter
 _____ County Adult Detention Center Other: _____
- 2.) **Supervising Agency:** For purposes of monitoring this treatment plan, _____ located at _____, _____, Arizona 8____, will be considered the supervising agency. _____ will be the supervising medical director.
- 3.) **Daily Activity:**
- 4.) **Outpatient Clinical Management Services:** The member will receive clinical management services from _____. _____ as medical director will review and approve clinical services/team assignments.
- 5.) **Medication:** The member will comply with prescribed doses of psychiatric medication under the supervision of a _____ psychiatrist.
- 6.) **Financial Management:** The _____ County Public Fiduciary, or (other) _____ is payee for the member's funds; or the member will manage his/her own funds.
- 7.) **Specific Conditions:** The individual shall:
 - a. Keep all appointments with psychiatrists, mental health staff, and criminal justice staff, if applicable, as required by the Supervising Agency.
 - b. Take all medications as prescribed by the Supervising Agency.
 - c. Comply with lab tests to maximize medication safety/compliance.
 - d. Not use or possess any illegal drugs or non-prescribed drugs. The individual shall take any drug tests ordered by the Supervising Agency. The individual may not possess or use alcohol without the express permission of the Supervising Agency.
 - e. Maintain food and shelter required by the Supervising Agency.
 - f. Not engage in any activity that violates any local ordinance, state, or federal law, or which is dangerous to self or dangerous to others.
 - g. Not leave the County without prior expressed approval by the Supervising Agency.
 - h. Not own or possess any firearms.

- i. Comply with existing orders of protection and/or not have any contact with specific individuals as directed.
 - j. Sign any authorization necessary for the Supervising Agency to disclose protected health information to the member's attorney appointed or retained pursuant to A.R.S. §36-536.
- 8.) Re-hospitalization: Failure to do well, or failure to comply with the principles of this treatment plan, may result in re-hospitalization. Revocation to an inpatient setting will be determined by the medical director.
- 9.) Duration: The above treatment plan will remain in effect for up to 365 days from the date of the original hearing, unless a modified plan is submitted at a later date and may be extended due to unauthorized absences pursuant to A.R.S. §36-544 or annual examination and review of orders based on Grave Disability or Persistent or Acute Disability pursuant to A.R.S. §36-543.

THE COURT ORDERS that the Supervising Agency's medical director or physician designee shall have the authority to enforce the requirements of the individuals' treatment including the authority under A.R.S. §36-540(5) to direct a Peace Officer, without further order of the Court, to apprehend and transport the individual to an inpatient treatment facility if the individual is in need of immediate inpatient care due to behavior that is dangerous to self or others.

Medical Director/Physician Designee	Signature	Date
Provider Staff (who reviewed the plan with the individual)	Signature	Date
Individual/Member's Name	Signature	Date
Judge/Court Commissioner	Signature	Date

NOTICE

According to A.R.S. §36-546, a person receiving court ordered treatment or anyone acting on his/her behalf can request the court to release him/her from the order for treatment once every sixty days. The agency responsible for supervision of the person's court ordered treatment must notify the person of this right to request judicial review of the order for treatment and to consult with an attorney every sixty days. Additional information about the process for requesting judicial review will be provided by the supervising agency at the time required notifications are made.

Copies to: BUHP
Individual's Attorney: