

## 10.1 Borderline personality disorder (BPD) management plan template

### Personal details

Name:	Date of birth:
Address:	
Phone:	
Family member's/partner's/carer's contact details:	
Date:	Next review date:

### Health professionals involved in treatment

Name	Contact details	Role	Alternative contact person	Contact for alternative	Copy of this plan received (✓/✗)

### Case summary

Brief history:
Diagnosis:
Current living arrangements and social circumstances:

### Risk assessment

<b>Risk to self</b>
Acute suicide risk:
Long-term patterns of self-injurious acts High-lethality behaviours: Low-lethality behaviours:
Other risks:
<b>Risks to other people</b>
<b>Risks to property</b>

### Treatment goals

Short-term treatment goals:
Long-term treatment goals:

## Current psychosocial treatment

Approach	Commencement date	Planned review date	Provider/s

## Medicines

*Current medicines (if any)*

Name of medicine	Dosing information	Purpose

Medicines previously unsuccessful in a therapeutic trial:

Cautions (e.g. medicines associated with overdose):

Health professional primarily responsible for prescribing and reviewing medicines:

## Management of self-harm during office hours

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## Management of self-harm outside office hours

If person calls before self-harm has occurred (chronic pattern):

If person calls after self-harm has occurred (chronic pattern):

## Agreed responses to specific presentations

Presentation	Response	Notes

## Indicators for reviewing treatment plan

Indicators of increased risk related to self-harm/suicidality behaviour patterns:

Other possible indicators of increased risk:

**Emergency department treatment plan (if applicable)**

Usual clinical presentations:
Indications for hospital admission:
Predicted appropriate length of admission:
Discharge planning notes:

**Inpatient treatment plan (if applicable)**

Indications for admission:
Predicted appropriate length of admission:
What to do if person self-harms during admission:
What to do if person found to be under the influence of substances while admitted:
What to do if person expresses suicidal thoughts at the time of a planned discharge:

**Rationale for interventions and strategies**

*Clinical interventions/responses that have been helpful in the past:*

Situation	Intervention or response	Outcome	Notes

*Clinical interventions/responses that have been unhelpful in the past:*

Situation	Intervention or response	Outcome	Notes

**Coping/management strategies used by the person:**

Situation/problem	Strategy/action	Successful (yes/no)	Notes

**Signatures**

Clinician:
Client (if appropriate and willing):
Family/Partner/Carer (if client is willing):

Adapted from Spectrum (BPD service for the state of Victoria)<sup>162</sup>