

2019 Submission - Royal Commission into Victoria's Mental Health System

Organisation Name

N/A

Name

Mr Graham Rodda

What are your suggestions to improve the Victorian community's understanding of mental illness and reduce stigma and discrimination?

N/A

What is already working well and what can be done better to prevent mental illness and to support people to get early treatment and support?

N/A

What is already working well and what can be done better to prevent suicide?

N/A

What makes it hard for people to experience good mental health and what can be done to improve this? This may include how people find, access and experience mental health treatment and support and how services link with each other.

N/A

What are the drivers behind some communities in Victoria experiencing poorer mental health outcomes and what needs to be done to address this?

N/A

What are the needs of family members and carers and what can be done better to support them?

N/A

What can be done to attract, retain and better support the mental health workforce, including peer support workers?

N/A

What are the opportunities in the Victorian community for people living with mental illness to improve their social and economic participation, and what needs to be done to realise these opportunities?

N/A

Thinking about what Victoria's mental health system should ideally look like, tell us what areas and reform ideas you would like the Royal Commission to prioritise for change?

N/A

What can be done now to prepare for changes to Victoria's mental health system and

support improvements to last?

"The need for reporting on the rate of use of compulsory mental health treatment There is currently considerable debate about the use of compulsory mental health treatment in Victoria. (1) Unfortunately this debate is not informed by publicly available rates of use data, both for Victoria as a whole, and by individual public mental health services. While the number and length of compulsory treatment orders are published by the Victorian Mental Health Tribunal, there is no compulsory treatment rate of use data publicly available. Fortunately Victoria does collect statewide compulsory mental health treatment data, and thus the establishment and publication of rate of use data would not be difficult. A useful example of rate of use data can be found in New Zealand where compulsory mental health treatment rate of use data is included as part of the annual report of the New Zealand Office of the Director of Mental Health and Addiction Services. For example in the 2017 annual report there are rates published for (2): Average number of people per 100,000 per month required to undergo compulsory assessment Average number of people per 100,000 on a given day subject to a community treatment order Average number of people per 100,000 on a given day subject to an inpatient treatment order The New Zealand approach allows publication of comparisons of results by district health board, by age, and by sex. In addition Maori and no-Maori compulsory treatment rates are reported and discussed. Such rates can also be adopted by Victoria, which would allow for informed discussion and monitoring of Victoria's rate of use of compulsory treatment. . Recommendation That data on the rate of use of compulsory mental health treatment be published by the Victorian Government to allow the use of such treatment to be compared between Victorian public mental health services and with other jurisdictions including New Zealand. (1) Recent journal articles include: Barnett P, Matthew H, Lloyd-Evan B, Backay E, Pilling S, Johnson S. Compulsory community treatment to reduce readmission to hospital and increase engagement with community care in people with mental illness: a systematic review and meta-analysis. *The Lancet* 2018; 5: 1013-1022. Ryan C. Community treatment orders are (somewhat) effective: Their future in the context of rights-based mental health law. *Australian and New Zealand Journal of Psychiatry*; 2018 debate: 1-2. Vine R, Tibble T, Pirkis J, Judd F, Spittal M. Does legislative change affect the use and duration of compulsory treatment orders? *Australian and New Zealand Journal of Psychiatry*; 2018 research: 1-8. (2) Office of the Director of Mental Health. Annual Report 2017; 26-34. <https://www.health.govt.nz/publication/>"

Is there anything else you would like to share with the Royal Commission?

N/A

**The need for reporting on the rate of use of compulsory mental health treatment
Submission to the Royal Commission into Victoria's Mental Health System
Graham Rodda, 2 July 2019**

There is currently considerable debate about the use of compulsory mental health treatment in Victoria. ⁽¹⁾

Unfortunately this debate is not informed by publicly available rates of use data, both for Victoria as a whole, and by individual public mental health services. While the number and length of compulsory treatment orders are published by the Victorian Mental Health Tribunal, there is no compulsory treatment rate of use data publicly available.

Fortunately Victoria does collect statewide compulsory mental health treatment data, and thus the establishment and publication of rate of use data would not be difficult.

A useful example of rate of use data can be found in New Zealand where compulsory mental health treatment rate of use data is included as part of the annual report of the New Zealand Office of the Director of Mental Health and Addiction Services. For example in the 2017 annual report there are rates published for ⁽²⁾:

- Average number of people per 100,000 per month required to undergo compulsory assessment
- Average number of people per 100,000 on a given day subject to a community treatment order
- Average number of people per 100,000 on a given day subject to an inpatient treatment order

The New Zealand approach allows publication of comparisons of results by district health board, by age, and by sex. In addition Maori and no-Maori compulsory treatment rates are reported and discussed.

Such rates can also be adopted by Victoria, which would allow for informed discussion and monitoring of Victoria's rate of use of compulsory treatment.

Recommendation

That data on the rate of use of compulsory mental health treatment be published by the Victorian Government to allow the use of such treatment to be compared between Victorian public mental health services and with other jurisdictions including New Zealand.

(1) Recent journal articles include:

- Barnett P, Matthew H, Lloyd-Evan B, Backay E, Pilling S, Johnson S. Compulsory community treatment to reduce readmission to hospital and increase engagement with community care in people with mental illness: a systematic review and meta-analysis. *The Lancet* 2018; 5: 1013-1022.
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