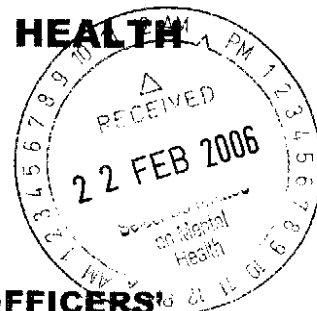


SENATE SELECT COMMITTEE ON MENTAL HEALTH

RESPONSE TO QUESTION ON NOTICE PUT TO REPRESENTATIVES OF THE PROBATION AND COMMUNITY CORRECTIONS OFFICERS' ASSOCIATION INCORPORATED (PACCOA) AT THE HEARING OF 28.10.05



The question on notice was recorded in the following extract from Hansard:

CHAIR: "... if you know of any *studies, papers or references* that might be of help to the Committee, just to follow up on the recommendation you made just a moment ago about a *mental health court system* which might be part of a *federal approach to law and justice*. That is an interesting idea. If some work has been done, such as comparisons from overseas, the committee would be very interested in hearing about that." (Emphases added)

PACCOA representatives have provided the following:

- The current position: Australia's state mental health courts (prepared by Brian Norman).
- Two CD-ROMs containing research materials on overseas jurisdictions, foregrounding the US Criminal Justice/Mental Health Consensus Project www.consensusproject.org Photocopies of other relevant articles/papers (prepared by Dale Kift).

Further enquiries to:

- ◀ Dale Kift: 02 9265 7500 or 0415 777 411 or
- ◀ Brian Norman: 02 9265 7500 or 0434 852 001
- ◀ Graeme Pearce, President of PACCOA, 08 8951 5626

- ❑ Recent statute amendment legislation permits magistrates to make a final determination of cases before them, without the requirement to receive submissions from the prosecution.
- ❑ People with co-morbid issues present particular challenges for the Court, particularly in bringing together disparate services to work with persons concerned.
- ❑ Challenges remain in building community services that are responsive to the often demanding needs of particular client groups.
- ❑ There are particular challenges for managing people from rural and remote communities.

THE OTHER STATES

It was not possible to locate other jurisdictions within Australia where therapeutic jurisprudence, in relation to the management of the mentally ill, has yet approached South Australia in its level of sophistication. Victoria, we are advised, is working to develop a Mental Impairment Court, however we were unable to obtain information about it at the time we inquired. We were advised that a business case had been developed in Western Australia, a couple of years ago, to develop a Mental Health Court but that resources could not be made available for evaluation and hence it has not, so far, eventuated.

Senior mental health nurses provide triage services to courts in a number of jurisdictions. These can circumvent the often complex process of magistrates sending people off for assessment to mental health facilities or remanding people in custody for assessment. The mental health workers can recommend that a person be taken to hospital for more detailed assessment, consult with forensic specialists, place people into contact with local community services or re-connect them, if they have lost contact. The building of close working relationships with magistrates, legal and other agencies is vital, as it sometimes means that an assessment will be sought on a person who might otherwise have been dealt with on the legal merits of the case and “slipped” into the justice system, with a mental condition undetected.

Forensic Community Mental Health Services exist in some jurisdictions, not in others, whilst they are in their inception in NSW. In Western Australia, the challenge has been to find a way of providing forensic services to cover vast and remote areas, within communities where issues, such as taking medication, are not well understood. Western Australia is working to develop a model where community health (often including general practitioners) delivers the bulk of services, including those with forensic issues. In remote areas, access to scarce, specialist, forensic services would be by way of video and teleconferencing, as needed. By equipping and training community health staff to manage less problematic issues, the resources of forensic mental health services would be better able to take on the more challenging and higher-risk people.

There is a proposal to develop a smart-card system which, with the nominated person's authority, would provide access by the treating professional to the patient's medical and psychiatric treatment history.

Inquiries of people in justice and health agencies suggest that, whilst services are woefully inadequate in many respects, there is a good deal of information sharing and willingness to address the needs of those whose offending behaviour is connected to mental impairment.

One person interviewed, likened the development of services for people with mental illness, who come into contact with the criminal justice system, to making a piece of macramé. Each of the services, community, hospital, courts and justice, needs to be held together by a common thread. If the thread gives away at any point, the whole piece falls apart.

Brian Norman
(February 2006)