Question on Notice

No. 1016

Asked on 12 September 2023

MS S BOLTON ASKED MINISTER FOR HEALTH, MENTAL HEALTH AND AMBULANCE SERVICES AND MINISTER FOR WOMEN (HON S FENTIMAN)—

QUESTION

With reference to mental health issues and contact with the mental health care system being common denominators in a number of incidents and crimes in our communities including homelessness and murder—

Will the Minister advise (a) what the current process is in early identification and intervention including for hospitals when they cannot hold a person under a mental health or drug order and (b) what changes are being considered in efforts to prevent these tragedies?

ANSWER

Any death is tragic, and I understand the how far reaching the impact of loss of life has on families, friends, and community.

Improving the mental health system and service delivery is a top priority of mine and our government is absolutely committed to ensuring quality support is provided to the individual, their family, carers, and support persons.

All people referred to public mental health alcohol and other drug services undergo a routine risk screen to identify potential risk across a range of risk domains including suicide, self-harm, violence, domestic and family violence (DFV), treatment non-adherence, risk of harm to children, and vulnerability.

Risk screening is used to support risk prevention and management planning, which is incorporated into a person's care planning. Where assessment identifies a heightened risk to others, a more intensive risk assessment and management process is applied.

The *Mental Health Act 2016* (the Act) promotes voluntary engagement with mental health, alcohol and other drug care wherever possible. Where a person lacks capacity to consent, options for treatment must be considered that place the least restriction on the person's rights. Involuntary care may be provided where it's required to ensure safety and minimise harms to the person or others.

Irrespective of whether or not someone is assessed as requiring involuntary treatment, we are committed to ensuring that people have access to a comprehensive range of services that provide the right care at the right time.

People living with mental illness and problematic alcohol and other drugs often experience poor social and economic circumstances, including unstable housing or homelessness and difficulty gaining and maintaining employment. As part of our \$1.645 billion *Better Care Together* investment we've committed \$94 million over 4 years to improve the social and economic outcomes for people experiencing these issues.

In collaboration with other agencies, we are supporting initiatives that improve tenancy sustainment, including improved access to secure housing for people with multiple complex mental health needs and employing a housing worker to link young people with immediate housing and appropriate support services.

In 2022-23, the Work Skills Traineeships project created 35 job opportunities for people living with a mental illness and/or problematic alcohol and other drug use in Nambour and Caboolture.

This year, we are piloting a person-centred human services case management model, targeting young people under the age of 18 years who have a neuro-developmental or intellectual disability and who are in contact with the youth justice system.

On the Sunshine Coast, *Better Care Together* has delivered a new Aftercare service that enables people at risk of suicide to access to up to three months of psychosocial support following a suicide attempt or crisis.

The levy is also establishing new Crisis Support Spaces at the Sunshine Coast University and Nambour Hospitals. These services will offer peer and clinical support to people in mental health or suicidal crisis as an alternative to the emergency department.

In 2025, a new Head to Health service that will offer immediate, short- and mediumterm mental health and related supports to Sunshine Coast residents, free of charge and without appointment.

We are continuing to work with the Queensland Mental Health Commission to improve approaches and models of care to provide the right support and treatment in the community, early in life and early in illness.

Whether it's for ourselves, our children, or our parents – every single one of us expects, and is entitled to, high-quality care.