

Reducing compulsory treatment in Victoria

Community mental health and wellbeing services are partnering with Safer Care Victoria's Mental Health Improvement Program (MHIP) to find strategies to reduce the use of compulsory treatment in Victoria.

To improve the experience of care, quality and safety for consumers, mental health and wellbeing reform emphasises the importance of consumers making decisions on their care in partnership with their families, carers, supporters, clinicians and support teams.

A key recommendation of the 2021 Royal Commission into Victoria's Mental Health System, this initiative is aimed at reducing the use of, or duration of, compulsory treatments.

What does reducing Compulsory Treatment mean?

The *Mental Health and Wellbeing Act 2022* (the Act) provides the legal framework for (among other things) the assessment of people who appear to have a mental illness and the treatment of those who have a mental illness where certain criteria under the Act are met.

The Act's objectives include providing for comprehensive, compassionate, safe and high-quality mental health and wellbeing services that promote the health and wellbeing of people living with mental illness and psychological distress and that include a broad and accessible range of voluntary treatment and support options to enable a reduction in the use of compulsory assessment and treatment.

Under the balancing of harm principle in the Act,¹ compulsory assessment and treatment are not to be used unless the serious harm or deterioration to be prevented is likely to be more significant than the harm to the person that may result from their use.

The Act includes compulsory assessment criteria² and compulsory treatment criteria.³ The compulsory assessment criteria are required when making a person subject to an assessment order under the Act. The compulsory treatment criteria are required when making a person subject to a temporary treatment order or treatment order under the Act. Both temporary treatment orders and treatment orders operate for a fixed duration and require timely oversight by the Mental Health Tribunal.⁴

1 Section 82 of the Act.

2 Section 142 of the Act.

3 Section 143 of the Act.

4 Mental Health and Wellbeing Act 2022 Handbook, see for example sections 187 and 189 of the Act.



**Sensitive
content
warning**

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How will Compulsory Treatment be reduced?

In a partnership between the MHIP and community mental health and wellbeing services around Victoria, there is opportunity to make lasting improvements and map a path for change. There is currently limited evidence-based research on strategies which are proven to reduce compulsory treatment.

The MHIP team is currently partnering with six community mental health and wellbeing services to collaborate and design strategies to reduce compulsory treatment. The scope of the initiative ranges from early intervention, improving referral processes and greater communication between treating teams.

MHIP works with community teams to build their confidence and capability for quality improvements, through implementation planning, coaching, tools and sharing improvement science methodology. Participating services are supported to design, test and adapt changes to prove what improvements will reduce compulsory treatment.

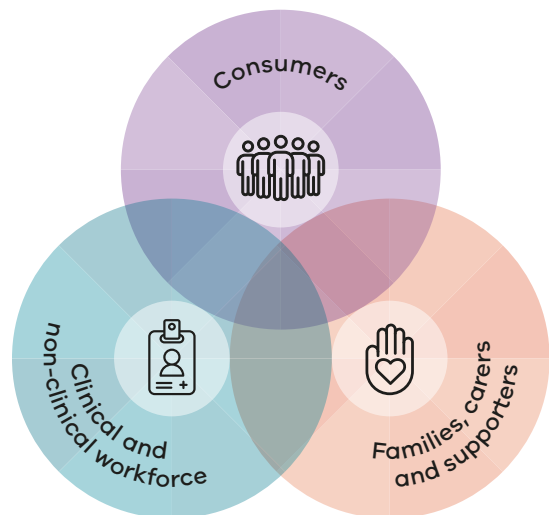
Journey mapping to make lasting change

As well as working with community mental health and wellbeing teams, the MHIP is also partnering with co-design experts, consumer advocates and Lived and Living Experience voices to shape the initiative. Together, participants are exploring key aspects of the journey of consumers, their families and carers with community mental health and wellbeing teams to identify improvements for testing.

Elevating consumer voices

People with Lived or Living Experience as a consumer, family member or carers are crucial to shaping reform and informing how the MHIP and mental health and wellbeing services improve the care and safety outcomes in Victoria.

The MHIP is working with community mental health and wellbeing teams to ensure Lived and Living Experience voices and perspectives are involved in their workforce, and in community service teams who will test improvements.



Leading reform at Latrobe Regional Health

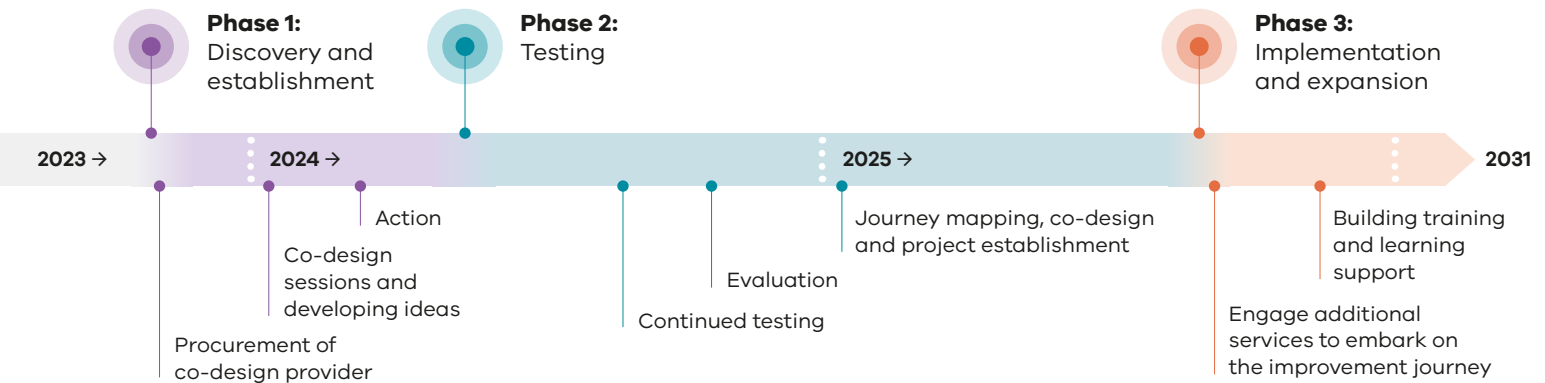
Latrobe Regional Health (LRH) Mental Health Service proactively partnered with the MHIP thanks to the emphasis on community mental health and wellbeing teams.

“We have five community teams, and all are diverse in their own way. We saw the opportunity this initiative could offer in making a positive impact for consumers through community teams,” said Linda Locke, Director of Nursing Mental Health, LRH.

“Our service has a strong appetite for change and improvement, so we were able to come together and work with MHIP to get involved. Working with MHIP helps us bring organisation-wide focus on this and gives us the opportunity to make lasting change to benefit our consumers, their families and carers.

Timeline

Work towards reducing compulsory treatment in Victoria in ongoing, with expansion to more services expected in 2025.



Questions?

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