



Media Release

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Nurses Welcome Forensic Mental Health Liaison Role as a First Step

Health Minister Jack Snelling's announcement of a pilot scheme to employ Forensic Mental Health staff to better manage people in the State's court system is a positive step forward, said ANMF (SA Branch) CEO/Secretary Adj Assoc Professor Elizabeth Dabars.

"We welcome the Minister's announcement of a Forensic Mental Health Liaison Officer as a positive step forward," said Adj Assoc Professor Dabars.

"Some success has been claimed from similar roles interstate and overseas. However, we are keen to see that the pilot will be closely monitored and evaluated to ensure it is effective in our environment and context.

Whilst welcomed, there remains a clear incapacity of appropriate beds to meet demand and, as a result, ANMF (SA Branch) continues to call for additional Forensic Mental Health beds. We have recently raised this with the Mental Health Review Team, whose findings are due in several weeks time. There is currently a waiting list of 30 with demand growing daily. 40 beds are currently available and only 20 additional beds are planned at this stage. This will be insufficient to meet demand.

We are particularly interested in the practical impact of the Liaison Officer role. If no forensic mental health bed is available, the only alternative is to house the Forensic Mental Health patients in Emergency Departments, irrespective of the view of the judge and/or the Liaison Officer.

The Liaison Officer role must also have real impact by having the authority and ability to influence judicial decision-making.

The bottom line is that people subject to Section 269 of the Criminal Law Consolidation Act are not medically unwell. The issue is in fact a custodial one and appropriate accommodation (ie. a forensic mental health bed) is not available to them. It is not appropriate to accommodate them in a busy Emergency Department, and it is unreasonable for other patients attending the Emergency Department with a medical emergency or condition requiring assessment and treatment.

The current arrangement that leaves forensic consumers in an Emergency Department for extended periods of more than 4 hours or, where they are assessed as not requiring health care, is clearly unacceptable. We are aware of instances of these consumers being accommodated in the Emergency Department for up to 8 days. This is not an appropriate environment for this specific consumer group. These consumers require an alternative, place of care appropriate to their needs.

ANMF (SA Branch) will meet with Departmental representatives on this critical issue later today. We hope that these and other issues can be further progressed at that time."

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