MENTAL HEALTH COURT DIVERSION AND SUPPORT PROGRAM
SUMMARY OF 2014 EVALUATION

The Mental Health Court Diversion and Support Program comprise two pilot programs: the Start Court, a dedicated mental health court for adults that operates within the Perth Magistrates Court; and Links, a specialist mental health service based at the Perth Children’s Court. Both components of the program commenced in early 2013.

The Program was evaluated in late 2014. The 2014 evaluation consists of two reports:

- A program evaluation (by Sankey Associates in collaboration with Clear Horizon WA); and
- A cost analysis (by Natalie Metcalfe CA, independent consultant).

The evaluation drew on stakeholder surveys and interviews as well as data that was collected between the commencement of the Program and 31 July 2014.

Summary of program evaluation

The primary purpose of the program evaluation was to independently assess the impact of the program against its objectives, including in relation to participants’ mental health, wellbeing and engagement with treatment. The program evaluation also included a comparative review of mental health court programs in Australia.

Start Court (adult program)

The Start program is Australia’s only full-time mental health court. It is operated by a dedicated team comprising a Magistrate, court staff, forensic psychiatrist, specialist mental health clinicians, community corrections officer, police prosecutor, defence lawyer and community support coordinators.

The evaluation received input from 17 program participants, 11 families and 28 other stakeholders. The methodology included qualitative interviews, analysis of program data, a series of observations of Start program hearings and a literature review. Findings include:

- The Start program pilot was established quickly and effectively. Five organisations (Department of the Attorney General, Department of Health, Department of Corrective Services, Legal Aid Western Australia and Western Australia Police) came together and delivered the service from day one. A non-government organisation, Outcare, became part of the team five months later.

- In a short period of time the pilot program amassed the right people, skills, knowledge and processes to fulfil the Perth Magistrates Court’s stated requirements.

- The pilot program has operated to capacity since being initiated. 442 individuals were referred to the Start program between 18 March 2013 and 31 July 2014. The number of referrals indicates that Magistrates and lawyers have confidence in the court and confirms the need for it.

- The Program’s service delivery model has evolved to respond to the complex needs of the target group requiring this intervention.
• Everyone referred to the Start program has the opportunity to benefit and can access treatment and support without entering a plea.

In the period 18 March 2013 to 31 July 2014, 104 individuals participated in a program of intensive judicial supervision and case management designed to reduce their criminogenic risk factors. They engaged in treatment and support programs to improve their mental health, reduce alcohol or other drug use and address their psychosocial needs. Participants and their families reported valued improvements in family relationships, access to treatment and overall wellbeing, as well as in their understanding of their own, or their family member’s, mental illness. The evaluation includes a number of case studies that illustrate the changes that have been experienced as well as the complex psychosocial issues with which all of the participants are faced.

It is too early to know if the program will achieve its objective of reducing reoffending. Nevertheless, the Start program is aligned with good practice and there is reason to be optimistic that this objective can be achieved.

A key finding is that the multi-agency, multidisciplinary team has been established successfully and that participants are receiving a single system experience.

Links (children’s program)

The Links program is based at the Perth Children’s Court and has an outreach capability. It works alongside the Court and focuses on building trusting relationships with a group of highly vulnerable young people who have serious emotional and mental health needs. A total of 217 young people were referred to the Links program during the evaluation period.

The evaluation received input from 21 stakeholders including the President and two Magistrates of Perth Children’s Court, Youth Justice Officers, Metro Youth Bail Service, Banksia Hill Detention Centre and Aboriginal Legal Service. The methodology included qualitative interviews, analysis of program data, an observation of the Children’s Drug Court and a literature review. Findings relating to the Links program include:

• Links fills a gap by providing an essential clinical mental health capacity at Perth Children’s Court. The program provides clinical assessments and reports to the court, conducts emergency assessments, helps direct case management and enables early intervention.

• An objective of the program is to reduce reoffending, however the evaluation questioned whether that was an appropriate or measurable objective for Links.

• The Links team is skilled at building the trust of young people who have previously been disengaged from services and connecting them to community based treatment, school, accommodation and other services.

• Links has established a cohesive multidisciplinary team and stakeholders reported that this has improved inter-agency coordination.

Programs in other jurisdictions

A comparative review of programs in other Australian jurisdictions highlights differences between the Western Australian pilot programs and more established programs in other states.
Start Court participants tend to have more complex mental health needs and are charged with more serious offences than participants of similar programs in other jurisdictions. The inclusion of community support coordinators with access to brokerage funding appears to be a unique feature of the Western Australian model. Links appears to be a unique program, meaning that an inter-jurisdictional comparison was not possible.

**Conclusions**

The evaluation concluded that the program is generating positive outcomes for a complex client group and is strongly supported by judicial officers, lawyers, clinicians, families and other stakeholders. However, the evaluation also found that it was too early to fully quantify program benefits, and on this basis recommended that the pilot phase of the program be extended until June 2018 to enable further evaluation.

The evaluation also recommended that consideration be given to:

- Establishing closer links with the Intellectual Disability Diversion Program and the Drug Court;
- Solidifying governance arrangements to reduce reliance on ‘good will’ between the various agencies involved in the multi-disciplinary team;
- How support can be provided to individuals who appear in higher courts (who typically don’t have access to court-based diversion programs) and those with the most complex needs;
- Developing a complete diversion strategy that encompasses prevention, pre-arrest and post-release interventions as well as court-based interventions; and
- Expanding Links to other metropolitan courts.

**Summary of Cost analysis**

The cost analysis compared the cost of the program with the cost of alternatives such as imprisonment and community corrections supervision. It was found that both the Start Court and Links are significantly cheaper per day than imprisonment and juvenile detention respectively, but are more expensive than mainstream community corrections supervision. The latter finding was expected given that both the Start Court and Links offer a broader range of supports and services than community corrections supervision.

It was found that the cost per day of undertaking the Start Court is slightly less than the cost of the Western Australian Drug Court. Comparisons with similar programs in other jurisdictions could not be made due to the lack of cost information available for other programs.

The cost analysis recommended improvements to data collection processes and the development of a new ‘measurement framework’ with a greater emphasis on measures of clinical improvement.