

## ADVICE TO THE COMMISSIONER FOR MENTAL HEALTH

### Planning: Graylands Reconfiguration and Forensics Mental Health Services

October 2021

#### BACKGROUND

The Mental Health Advisory Council (Council) recently sought input regarding the decommissioning and reconfiguration of the Graylands Hospital site including planning for forensics services and Selby Older Adult Mental Health Service. These included presentations from:


- Ms Debora Colvin, Independent Member of the Graylands Reconfiguration and Forensics Taskforce (GRAFT); and
- Dr Nathan Gibson, Chief Psychiatrist; Dr Geoff Smith, Senior Psychiatrist Research and Strategy and Adjunct Associate Professor Theresa Williams, Director Research and Strategy, Office of the Chief Psychiatrist.

The need to take action regarding the decommissioning and reinvestment of the Graylands Hospital site has been acknowledged for many years. Three million dollars was allocated to the Department of Health in the 2019-20 Budget for detailed planning. In January 2021 the GRAFT was announced to inform State government re: the required planning and reinvestment of the site, forensic services and Selby Older Adult Mental Health Service. The GRAFT membership includes seven public sector leaders indicating that a lens broader than health is required to achieve the best possible outcomes for people and their families and carers. The Council understands that extensive and detailed modelling has been undertaken to inform the planning and that a number of sites have been identified as potential options to locate an expanded forensic mental health service.

#### ADVICE/RECOMMENDATIONS

Given the above, the Council recommends:

- The significantly expanded forensic mental health services which are urgently required to meet current and future needs are maintained at the Graylands Hospital site. This will help to minimise adverse community reaction and stigmatising public commentary such as occurred in 2014/15 during the identification of community sites for the Disability Justice Centre;
- Under no circumstances should the expanded forensic mental health service be located on or near a prison site. This would be a retrograde step and incongruent with consistent feedback from individuals, families and carers with forensic mental health services including those who provided input to the development of the forensics plan as part of the Mental Health, Alcohol and Other Drug Services Plan 2015-2025;
- Planning is undertaken to facilitate people from regional and rural areas to access forensic rehabilitation programs closer to their usual place of residence once the initial phase of their acute treatment at the forensic hospital is complete. This is particularly important for Aboriginal people whose connection to country and culture are key protective factors in their social and emotional wellbeing. While low population numbers would not support the development of cost-effective forensic step-down facilities across the state, consideration should be given to the development of services in key regional centres;

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- Opportunities are pursued to enable a broad range of recovery-focussed services to be provided in an integrated way or co-located on the site. This could include employment services such as the evidence based Individual Placement and Support model <https://ipsworks.waamh.org.au>; and consumer and family/carer peer support and peer led groups such as GROW, Alcoholics Anonymous (AA), Narcotics Anonymous (NA) and the Hearing Voices Network (HVN).
  - The site needs to be reconfigured in a way that is culturally welcoming and provides spaces for Aboriginal healers to be easily accessed, yarning sessions to take place and outside areas in which people can congregate socially, for example, around a fire pit.
  - The importance of maintaining accessible green spaces both for people who are in secure settings and on the general site were emphasised given the importance of nature in recovery and wellbeing.
  - Social enterprise opportunities are considered to provide volunteering, employment, experience for people in recovery as well as providing opportunities for community engagement and participation. These enterprises could be located in the heritage-designated buildings and might include a café; Aboriginal art gallery; yarning spaces; training and development rooms for hire;
  - Models of care and service are developed, allowing for continuous improvement, to inform any capital building to ensure the best possible opportunity for the delivery of contemporary, cutting-edge services; and
  - Contemporary models of care which have been recently developed and which are aimed at responding effectively with people with conditions which have traditionally been both generally stigmatised and which are over-represented in forensic settings - such as the Statewide Personality Disorders Model of Care - are implemented as part of any reconfiguration and expansion of services. This includes the development of specific specialist Statewide services for people in the LGBTIQ+ group and people with atypical responding patterns and neurodiversity (such as Personality Disorders and Autism Spectrum disorders).
  - Research, learning and development is crucial and should be available and integrated on the site to maximise professional development, including opportunities for students and staff in health services and the associated mental health sector. This could include co-location of university researchers as well as the co-production of Recovery College courses.

Council members are keen to provide input to and advice on models of care/service and workforce when these elements are being developed.



Sincerely

Margaret Doherty  
CHAIRPERSON  
Mental Health Advisory Council  
28 October 2021