

6<sup>th</sup> July 2022

To: Dr John Brayley Chief Psychiatrist Office of the Chief Psychiatrist South Australia Email: john.brayley@sa.gov.au

Dear Dr. Brayley

Re: Interim urgent recommendation for Regional Review (CPTORRegionalReview022022)

The review panel undertook site visits for the purpose of the Regional Review (CPTORRegionalReview-022022) on the week of the 20<sup>th</sup> June 2022 and were impressed with the expansion and growth of country mental health services that has occurred over the past decade or so. The commitment of staff was clearly evident alongside a recognition that much work is still to be done in terms of ensuring a system that equitably provides to the needs of country residents and communities of South Australia.

During the site visits, the review panel were made aware of a number of issues relating to staff, consumer and community safety. Although not employees of South Australian Department of Health and Wellbeing ("The Department"), the panel nonetheless feels obliged to bring these to your urgent attention.

With respect to the review panel's terms of reference, consumer and staff safety directly, and indirectly negatively impact on workforce retention, quality and continuity of care. Each of which are within the remit of the review. Consequently, I am writing to you to provide an interim recommendation to The Department prior to the full report scheduled for October 2022.

## **Interim Recommendation**

The Department undertake an immediate audit of patient and staff clinical environments and governance processes and practices across all 6 rural LHNs to ensure and promote safe and high quality mental health care for patients in accordance with the National Safety and Quality Health Services Standards (NSQHS).

Specifically, the review panel recommend a prioritisation of an audit with respect to NSQHS standards (Actions 1.7, 1.10 and 1.29), commensurate with practices and resources in the 4 metropolitan LHNs, regarding:

a. safety infrastructure including fixed and mobile duress alarm systems and responses



Administrative Headquarters - RCSWA Kalgoorlie: St Alban's Road (Rear of Kalgoorlie Hospital), Kalgoorlie WA 6430







- b. staff training in break away and physical restraint procedures across all disciplines and departments associated with responding to acute behavioural disturbance and physical aggression
- ensure adequate staffing levels and mix including consideration of the use of security guards at Integrated Mental Health Inpatient Units and Emergency Departments in regional resource centres.

The review panel found a number of issues and substantial variation across rural LHNs during the site visits. This included (but not limited to):

- outdated or lack of duress alarm infrastructure and pendants for staff working in Emergency Departments (ED), Inpatient Mental Health Inpatient Units (IMHIUs) and remotely in the community
- poor compliance with the use of duress systems when available
- inconsistent approaches to Code Blacks within and between sites
- no procedure or poor compliance with post Code Black event debriefing processes or monitoring
- no tracking systems for staff working remotely
- variable procedures with respect to ensuring safe working practices for staff undertaking community/home visits or working remotely
- an overemphasis on the use of SA Police to respond to Code Blacks in locations where Police resources are few and response times are highly variable
- no face-to-face Management of Actual or Potential Aggression (MAPA) training since March 2020
- no physical restraint training for mental health or ED staff
- a lack of monitoring of CCTV in higher risk areas of health services
- no security personnel availability in some EDs or IMHIUs
- a lack of dual egress doors for safe assessment rooms and mental health consultation rooms in emergency, inpatient and community facilities
- and an ongoing Worksafe investigation in one site.

The review panel understand current resourcing constraints facing rural LHNs which are expected to provide the same quality and safety of service delivery expected of centers with larger economies of scale. However, the review panel note similar commentary in the Office of the Chief Psychiatrist's inspection reports regarding environmental safety and processes across the rural LHNs indicative of a pattern of under-resourcing and incomplete remediation of significant safety concerns in EDs, IMHIUs and community mental health services. Further, while the review panel was concerned with rural mental health services, it should be noted the emergency departments provide services across the spectrum of health for the entire community.

We bring your attention to case law in other jurisdictions that determined that the <u>first duty</u> and obligation of an employer is the safety of 'workers engaged or caused to be engaged by the person'. This is reflected in an employer's responsibility under WHS legislation to provide a safe workplace.

We look forward to providing you with further correspondence regarding the final report as we come to the conclusion of our review.

Sincerely

Assoc Prof Mathew Coleman

Lead Reviewer, Regional Review SA

Dr Russell Roberts - Reviewer Professor Leadership and Management Charles Sturt University Director

**Equally Well Australia** 

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