



President's Update

Tribunal-initiated reviews

In circumstances when a panel requests a Tribunal-initiated review (TIR), could the member completing the Tribunal Deliberations (TD) please remember to include sufficient detail in the "Instructions to Tribunal Staff" section.

Instructions to Tribunal Staff:

- Arrange Legal Representation
- New Hearing date to be fixed
- Hearing time to be longer / shorter
- New address for patient, nominated support person or guardian

While the reasons for requesting the TIR may seem obvious to the panel, the next panel will not have access to the audio record of proceedings for the hearing. Also, the Hearings Coordinator does not review the content of the audio record or the TD to identify the reasons. So, please include not only the timing of the next hearing, but the reasons why the panel have requested the TIR. This content will then be provided to the next panel.

Updated resources – deidentified TDs and written ROPs

With the introduction of audio electronic recording, the deidentified example Records of Proceedings and Member Deliberations documents on the members' website were no longer relevant. We have therefore produced new deidentified examples of Tribunal Deliberations documents and written Records of Proceedings (where there has been a major fault of the audio recording). Please take some time to review these examples to ensure that you are correctly completing these important documents: [Deidentified example TDs and written ROPs | MHRT](https://www.mhrt.qld.gov.au/home/professional-learning-and-development/deidentified-example-tds-and-written-rops) <https://www.mhrt.qld.gov.au/home/professional-learning-and-development/deidentified-example-tds-and-written-rops> (please note you will need to log in to the members' website to access these documents).

Requests for statements of reasons for Mental Health Court appeals

As members are aware, for each appeal, the Mental Health Court requests that the Tribunal provide it with the documents that were before the Tribunal panel and a statement of reasons for the appealed decision. We have noticed that lately the Mental Health Court Registry seems to be prioritising appeals and has been listing them quite quickly. Unfortunately, this means that we are being asked to provide the statement of reasons quite quickly – and within the usual 21 day time period. We apologise for the reduced timeframes but please be aware that our requests are so that we can comply with the dates provided by the Court.

The Tribunal provides a range of resources to assist in the preparation of statements of reasons, including a style guide and a template and guide for each decision type: [Statements of reasons |](#)

[MHRT](#) (please note you will need to log in to the members' website to access these documents).

Mental Health Court update

Due to Justice Ryan needing to take some leave, Justice Ann Lyons has been appointed an acting judge of the Supreme Court and a member of the Mental Health Court until 14 June 2024. You may therefore see some decisions between now and June being made by Justice Lyons.

Monthly Stats

Please note that this data is approximate only.

March 2024	
MHC Orders	24 total new orders (4 were PPO matters) New FO(MH): 18 New FO(D): 1 Amended FOs: 2 TSO: 3
Appeals to MHC lodged	4
MHRT Hearings where a decision was made	1,138
MHRT Hearings where an adjournment occurred	289
SORs requested	38
Audio recordings requested	4
Adjournment rate	20.25%

Executive Officer's Update

Office Matters

New staff – Members may have noticed a number of new staff in the Hearings Coordination team recently. We have welcomed Stacey Pieck, Jodie Evans and Taylor Caton as Hearings Coordinators and look forward to getting the team back to 100% capacity. We are also hoping to be able to announce a new Acting Manager for that team shortly, along with a new staff member for our Corporate Services team.

Consumer Engagement

Translated videos - Following on from feedback that David Wenitong had received as part of his engagement work, the Tribunal undertook a project to translate its consumer videos into two languages that are used by consumers in Far North Qld and the Torres Strait Islands – Yumplatok and Wik Mungan. These videos can be found at [Aboriginal and Torres Strait Islander People | MHRT](#) and we have already received feedback that consumers are finding them very helpful which

has resulted in increased engagement.

Corporate Services

Thank you - Our Corporate Services team are very much looking forward to gaining an additional staff member to assist with their workloads and in the meantime, would also like to thank members for their patience with the numerous changes in forms and signature requirements which have recently been implemented. We understand that these changes are causing much frustration and we continue to work with Qld Health to streamline processes and requirements.

Portal – We know from previous feedback that one of the limitations for members in relation to the portal is the lack of a download all function, or at least a way to clearly and easily identify which documents have been downloaded. Our vendor, Resolve, continues to advise that this functionality is not currently possible. However, we are working on some internal changes (largely the work of Heath) which may assist with this process. We will liaise with members as we hopefully come up with a solution.

We are also aware that members find the captcha functionality and the way the portal closes out after a certain time other negatives of the system. Unfortunately, at this time there are no other solutions to these issues as they are a requirement of cybersecurity given the portal is accessed outside of the Qld Health network.

Website changes – We are currently working on a project to renew our website with a greater focus on engaging consumers. As a result of this work, the availability calendar will likely be moved to the portal. Before that occurs, we need to understand how members use the calendar and we will be touching base with a few members over the coming months to gain a better understanding of this.

Tolls – Just a reminder that in accordance with Tribunal policy, approval must be sought from the Executive Officer before using any tolls.

Expense Claims – When members are submitting an expense claim (eg reimbursement for parking) in hard copy format, could we please ask that you write your name on the back of the receipt just in case it comes loose for example? We now also have a dedicated in-tray in the Corporate Services pod atop the tall cupboards.

Hearings Coordination

Delay in August hearings schedule – Due to the ongoing member appointment process, we are unable to release the August schedule until we have confirmation from the Governor in Council as to who has been appointed. As members will be aware, this notification is often quite late, but we will give as much notice as possible.

Mid year break – Just a reminder that the mid year hearings break will commence on Monday 17 June. The last day of the break will be 3 July with hearings to commence from 4 July. On call hearings will occur during this period as usual.

Q&A

Reliance on Advance Health Directives (AHD) or Enduring Power of Attorney (EPOA) documents

Members have recently raised a few questions about when it may be appropriate to rely on an AHD or EPOA document, and what circumstances may mean that an AHD or EPOA is no longer valid. Consent to treatment by the patient themselves via an AHD or by a substitute decision-maker via an EPOA may present a less restrictive way for a person to receive treatment and that a relevant criterion when reviewing a treatment authority (see sections 13 and 421(1)(b)). Consent provided via an AHD may also be applicable to a panel's consideration of an application for approval to perform ECT (see sections 233 and 509).

Members may find it useful to refer back to [Communiqué 08/2023](#) where we discussed "Less restrictive vs Least restrictive", [Communiqué 07/2022](#) where we looked at "Determining the validity of an advance health directive (AHD)" and [Communiqué 09/2022](#) where we considered "What can a patient's attorney consent to? When will an attorney be considered a less restrictive way?".

When taking account of a person's views, wishes and preferences, a panel could have regard to evidence from a range of sources, including the person themselves (via oral or written submissions), someone relaying what the patient expressed to them (e.g. a legal or other representative, a member of the person's support network or someone in the treating team) or in a document such as an AHD or EPOA. The weight that the panel places on the evidence will depend on the usual factors considered when weighing up evidence, such as the reliability/credibility of the source, the recency/timeliness of the information, whether it can be shown that the person regularly changes their view or has maintained a consistent view, and whether relevant circumstances have changed for the person since the views were expressed. In terms of the validity of a document placed before the panel, members may feel it appropriate to consider that the document is valid unless they have any reason to doubt its validity (e.g. it is clear on its face that it has not been correctly completed, or someone attends the hearing and provides oral evidence as to why the document is not valid). Where in doubt, the members may wish to ask questions of the treating team, person themselves and other attendees to establish the reliability of the evidence put before it.

PL&D Update

Thank you to the members of our PL&D Committee for attending the first meeting for 2024 on 23 April. We welcomed Laura Mead, Jane Harte and Vanessa Bell to the Committee and they join existing members Andrea Walker, Matt Heelan and David Wenitong. We discussed a range of topics and hope to use that information to schedule some interesting scenario-based case study sessions in the near future.

Unfortunately, the masterclass on "The impact of culture on mental health" scheduled for 24 April needed to be postponed as our presenter, Dragos Ileana, Statewide Transcultural Mental Health Practice Leader, became unwell. We hope to reschedule that session soon.

In the meantime, you should soon receive a calendar appointment for the May masterclass session which will be presented by Queensland Forensic Mental Health Service representatives, Dr Tim Lowry, Statewide Program Coordinator FLO and CFOS and Dr Katrina Chiu, CFOS Clinical Director, and will focus on risk.

If any members are interested in undertaking our new in-house course Introduction to Trauma-informed Practice, please send an email to MHRT.PLD@mhrt.qld.gov.au. We have received positive feedback from those members who have tried the course and I can confirm that the assessment for this course is nice and quick – mostly multiple choice quizzes of a few questions each.

