Public Accounts and Estimates Committee

Inquiry into the 2021-22 Budget Estimates 27 May 2021

PORTFOLIO: MENTAL HEALTH

Witnesses:

- Hon, James Merlino
- Professor Euan Wallace
- Ms Katherine Whetton
- Mr Greg Stenton

- Mr Chris Hotham
- Ms Pam Anders
- Mr Matthew Hercus

QUESTIONS ON NOTICE

QUESTION 1

1. For the \$3.8 billion spend, how many additional frontline health workers will we actually have in place by the end of the financial year, June 2022?

Mr D O'BRIEN: Can I perhaps put it another way and go back to the question I asked earlier in education: for the \$3.8 billion spend, how many additional frontline health workers will we actually have in place by the end of the financial year, June 2022?

Mr MERLINO: So across the investment of \$3.8 billion, and obviously that is not just an investment that takes place in 2021 or 2022, the delivery over time for all of that investment is approximately 3000 additional mental health practitioners in the system.

Mr D O'BRIEN: So is that across the forward estimates?

Mr MERLINO: Yes. In terms of the \$3.8 billion investment across the forward estimates, the result of that investment, the approximate impact in terms of employment opportunities is around 3000.

Mr D O'BRIEN: The question was actually end of June 2022, and I am wanting to know whether we are going to have any soon or whether we have to wait four years. I know you do not just create professionals at the click of a finger, but perhaps if you could provide some further information on that.

BE Hearing Transcript, p. 4

Name of Committee member asking questions: Mr D O'Brien

RESPONSE

Answer:

The investment is estimated to support more than 1,200 additional healthcare workers in the mental health system by the end of June 2022.

Table 1. Estimated additional workforce required to support expansion in the mental health system by job category

Workforce type	Number	
Nursing	603	
Medical	74	
Allied health	486	
Welfare / peer workers	133	

Source: Department of Health

2. Please provide data relating to the number of people admitted to a mental health bed within 8 hours and within 24 hours, separated by health service up to today or at least until the end of April?

Mr D O'BRIEN: Thank you again, Chair. Secretary, could I ask a question to you. Last time in the PAEC hearings we were supplied with data relating to the number of people admitted to a mental health bed within 8 hours and within 24 hours, separated by health service. I am wondering if you could provide that data for us again on notice up to today or at least until the end of April? If you are happy to, perhaps just for the record, say that for Hansard purposes – sorry, Secretary.

BE Hearing Transcript, p. 7

Name of Committee member asking questions: Mr D O'Brien

RESPONSE

Answer:

Statewide result (1 July 2020 to 30 April 2021)

Financial Year*	Number of ED presentations departing to a mental health bed	Number of ED presentations departing to a mental health bed within 8 hours of arrival	Number of ED presentations departing to a mental health bed with 24 hours of arrival
FY20/21	10,130	5,306	9,730

Source: Victorian Emergency Minimum Dataset (VEMD).

Date extracted: 7 June 2021. Reported by departure date

Excludes Type of Visit Code '19' (COVID-19 Assessment Clinic), and Triage Category '8' (Dead on Arrival).

Excludes Albury ED

Health service level result (1 July 2020 to 30 April 2021)

Health Service (responsible designated mental health service; where applicable)	Number of ED presentation s departing to a mental health bed	Number of ED presentation s departing to a mental health bed within 8 hours of arrival	Number of ED presentation s departing to a mental health bed within 24 hours of arrival
Albury Wodonga Health	4	1	2
Alfred Health	414	312	414
Austin Health	348	180	348
Bairnsdale Regional Health Service (Latrobe Regional			136
Hospital)	136	92	

Ballarat Health Services	238	138	237
Barwon Health	383	235	383
Bass Coast Health (Latrobe Regional Hospital)	48	37	48
Bendigo Health	416	343	416
Central Gippsland Health Service (Latrobe Regional Hospital)	86	67	86
Eastern Health	1533	852	1,567
Echuca Regional Health (Bendigo Health)	42	39	41
Goulburn Valley Health	200	165	200
Latrobe Regional Hospital	562	309	562
Melbourne Health	135	33	134
Mercy Hospitals Victoria Ltd	584	303	559
Mildura Base Public Hospital	146	130	146
Monash Health	1113	465	1,077
Northeast Health Wangaratta (Albury Wodonga Health)	188	44	130
Northern Health (Melbourne Health, Austin Health <18)	953	270	953
Peninsula Health	695	511	694
Royal Children's Hospital	44	24	44
Royal Victorian Eye & Ear Hospital	0	0	0
Royal Women's Hospital (Melbourne Health)	1	1	1
South West Healthcare	141	120	141
St Vincent's Hospital Melbourne	323	268	323
Swan Hill District Health (Bendigo Health)	52	40	52
West Gippsland Healthcare Group (Latrobe Regional Hospital)	68	51	68
Western District Health Service (South West Health Care)	20	12	17
Western Health (Melbourne Health, Royal Children's <18)	1177	236	905
Wimmera Health Care Group (Ballarat Health Services)	48	28	46

Source: Victorian Emergency Minimum Dataset (VEMD).

Date extracted: 7 June 2021.

Reported by departure date

Excludes Type of Visit Code '19' (COVID-19 Assessment Clinic), and Triage Category '8' (Dead on Arrival).

Excludes Albury ED

- 3. Please provide a breakdown of the royal commission recommendations in a table, for each recommendation include:
 - the progress towards implementation,
 - due date,
 - which Minister and department has carriage over the recommendation, and
 - line item in this budget?

Mr D O'BRIEN: Likewise, possibly a question for the Minister, but either. The interim and final reports speak of the importance of increased data and reporting. I would like to ask if you could provide the committee a breakdown of the royal commission recommendations, the progress towards implementation and due date, which minister has carriage over the recommendation and which department, as was done for the family violence royal commission.

Mr MERLINO: Yes, very pleased do that, Mr O'Brien.

Mr D O'BRIEN: In a table or something would be good.

Mr MERLINO: Yes.

Mr D O'BRIEN: And likewise, if you could provide the committee with the line item in this budget that each of those recommendations relates to, if that is possible.

Mr MERLINO: That is possible.

BE Hearing Transcript, p. 7

Name of Committee member asking questions: Mr D O'Brien

RESPONSE

Answer: Please see the attached Excel document (*RCVMHS recommendation table*) for the requested breakdown.

Source: Royal Commission into Victoria's Mental Health System – Final Report – February 2021

Budget Paper 3: Service Delivery

Budget Paper 4: State Capital Program

- 4. In a media release from Mental Health Reform Victoria, \$2.2 million was provided last year to start design work for the Victorian Collaborative Centre for Mental Health and Wellbeing:
 - has all of the money been dedicated to a design project?
 - has that \$2.2 million been expended already and, if not, how much of it has been?
 - what is breakdown of this expenditure so far as to what it has gone to and what are the outcomes?
 - was a consultant contracted to undertake the design work, or has it been done within the department?

Mr HOTHAM: Yes. I think there are some stages to this, as the Acting Premier has talked about. So that 2.2 is not capital planning money, but it is work with a range of interested parties – the clinicians, researchers, practitioners – in the co-design of this. This is a central part of the royal commission's theme, as you know, and as the Acting Premier said, a lot of interest was sparked with the announcement of and the commitment to this initiative. So the \$2.2 million is for that early design work on what the service model is and how many aspects to that are in terms of that promotion, research and practice coming together.

Mr D O'BRIEN: And has that \$2.2 million been expended already and, if not, how much of it has been?

Mr HOTHAM: I can take that on notice.

Mr D O'BRIEN: If you would not mind. And also was a consultant contracted to undertake that design work, or has it been done within the department?

Mr HOTHAM: As I say, it was not capital design work.

Mr D O'BRIEN: No, no, no, design of the framework. I understand that.

Mr HOTHAM: I can take that on notice as well.

Mr D O'BRIEN: Okay. Perhaps if you would take on notice as well the breakdown of that expenditure so far as to what it has gone to and what the outcomes are.

Mr HOTHAM: Certainly.

Mr D O'BRIEN: That would be great. Thank you.

BE Hearing Transcript, p. 8

Name of Committee member asking questions: Mr D O'Brien

RESPONSE

Answer:

The 2020-21 State Budget provided \$2.2 million towards establishment of the Victorian Collaborative Centre for Mental Health and Wellbeing (Collaborative Centre), which will bring together people with lived experience, researchers, and experts to provide clinical and non-clinical services, conduct research and disseminate knowledge across the state.

Building on the Royal Commission's interim report, the Royal Commission's final report places the Collaborative Centre within a broader 'learning system' architecture that sets the conditions and structures needed to establish collaboration, research translation, innovation and adaptive practice across the system. The sequencing of work to establish the Collaborative Centre was reviewed following delivery of the final report in March 2021.

To date, \$0.2 million from the 2020-21 State Budget has been expended on key early establishment and planning activities, such as stakeholder engagement and technical expertise on the establishment of the Collaborative Centre as an entity. A further \$0.6 million has been allocated to research investigating best-practice models for collaborative centres.

Design work to establish the Centre has been led by Mental Health Reform Victoria, in partnership with the Department of Health and the Victorian Health Building Authority. Consultancy services have been engaged to assist where required, for example to assist in the delivery of an e-symposium, attended by over 200 stakeholders, and technical advice on the establishment of the Centre.

The 2021-22 State Budget provided \$18.6 million over four years to progress the establishment of the Collaborative Centre.

Source: 2020-21 State Budget Paper No. 3: Service Delivery (pages 64 and 76),

2021-22 State Budget Paper No. 3: Service Delivery (pages 8 and 11)

5. When can we expect the 500 new medium-term supported housing places (a Royal Commission recommendation) be available for young people?

Mr HIBBINS: I want to ask about the royal commission's recommendation in investing in 500 new medium-term supported housing places for young people with mental illness and unstable housing. Now, the budget includes money for co-design and planning but not for implementing them. When can we expect these dwellings will actually be available for young people?

Mr MERLINO: Thanks, Mr Hibbins. Let me just go to that. Mr Hibbins, the Deputy Secretary is telling me this is with the Minister for Housing's portfolio.

Mr HIBBINS: Right. Okay.

Mr MERLINO: So what I will do it that I will take it on notice. We will engage with Minster Wynne and his office either to respond when he is presenting here at the committee or we can get you some information.

BE Hearing Transcript, p. 10

Name of Committee member asking questions: Mr Hibbins

RESPONSE

Answer: As part of the 2021-22 State Budget's \$3.8 billion response to the recommendations of the Royal Commission into Victoria's Mental Health System, the Victorian Government is investing \$46 million in supported housing for adults and young people living with mental illness. To commence the first phase of implementation, \$5.436 million over four years (\$2.212 million in 2021-22) has been secured to undertake asset planning and co-design for 500 housing places for young people living with mental illness. The co-design process will determine the optimal composition and design of the housing types, along with the corresponding wellbeing support model. The codesign engagement is a critical phase of implementation and delivery on this recommendation to ensure that the voice of young people with lived experience informs the planning and delivery of the 500 places, and that the supported housing response is fit for purpose.

Homes Victoria will collaborate with the Department of Health, and the co-design engagements will be designed in alignment with the guiding principles set by the Royal Commission as well as the Victorian Government's Mental Health Lived Experience Engagement Framework. Young people with lived experience of mental illness, their carers and families will be central to this co-design process, with input from mental health services and other stakeholders.

The Royal Commission into Victoria's Mental Health System stated that the implementation timeframe for delivery of the 500 supported housing places for young people is the end of 2026.

Source: Homes Victoria

6. Of the 29 junior medical officers undertaking a psychiatry rotation in the next budget year, 2021-22, Can you please advise what the percentage is, at the moment?

Mr D O'BRIEN: Thanks again, Chair. Minister, I just want to go back to a question that the Member for Cranbourne asked about—or you were answering at least—with respect to junior medical officers getting a psychiatry rotation. What proportion of junior medical officers will undertake a psychiatry rotation in the next budget year, 2021–22?

Mr MERLINO: Twenty-nine.

Mr D O'BRIEN: Twenty-nine per cent?

Prof. WALLACE: No, no. Twenty-nine JMOs will undertake the rotation.

Mr D O'BRIEN: Right.

Prof. WALLACE: And then, as the minister said before, we will progressively increase the numbers such that it is mandatory for all new graduates—

Mr D O'BRIEN: Okay. So in 2023 it will be 100 per cent. Do you know what the 29 is as a percentage at the moment or what the cohort is?

Prof. WALACE: I don't know.

Mr D O'BRIEN: Could I perhaps ask that on notice, Secretary?

Prof. WALACE: Yes.

BE Hearing Transcript, p. 12

Name of Committee member asking questions: Mr D O'Brien

RESPONSE

Answer:

The additional 29 FTE positions supporting the 2021 rotation represents approximately 32 per cent of all junior medical officers (JMOs), averaged across Postgraduate Year 1 (PGY1) and Postgraduate Year 2 (PGY2) trainees.

Source: Mental Health Reform Victoria