Executive Support Unit MINISTERIAL CORRESPONDENCE – ACTION SHEET

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ACTION OFFICER: mwq COPIED TO:	
Response Yes Tequired:	No Action Direct / Board to respond
Response Minister for Assis signatory: Health Mini	I I I I I I I I I I I I I I I I I I I
Closing contact details: Departmental	N/A
Response Template*: A B C G Standard Letter: ESU Option Letter Number: Redirect to: Briefing note required: YES NO Briefing note template*: A B C	File / New and then click on Qld Health
COMMENTS: <u>Board to respond</u>	

ESU Contact: Diane Cochran Cum

ACKNOWLEDGEMENT:	Department Ref #:
☐ Acknowledgement Letter☐ Acknowledgement Email☐ Acknowledgement Not Required	Policy Advisor: Vaun Re-Issue: [
RESPONSE:	Re-issue. TV V(CATT)
☐ Minister ☐ Assistant Minister ☐ Chief of Staff ☐ Board Chairs ☐	- Imminent closure of barrett Adolescent Centre
File) BRIEFING NOTE REQUIRED BRIEFING NOTE NOT REQUIRED	Previous Dept Ref #:
COMMENTS / REQUESTS:	
Reviewed by:	Date: Slil

Courteney Hawkins

From:

Sent: Wednesday, 14 November 2012 9:47 PM

Health To:

Cc:

Imminent Closure of Barret Adolescent Centre Subject:

Attachments: BAC ,pdf

Dear Mr. Springborg, Please find letter registering my concern about the Barret Adolescent Centre and its imminent closure.

Thank you for your time,

Sincerely,

Date: 12.11.12

Mr. Lawrence Springborg MP

Minister for Health

GPO Box 48

Brisbane QLD 4001

Dear Mr. Springborg:

I write in my capacity as a private citizen who works as a Child and Adolescent Psychiatrist at the Mater Children's Hospital, South Brisbane. For 5 years I have been part of a team who provides acute psychiatric evaluation and treatment for children and adolescents on level 7 at the inpatient Child and Youth Mental Health Unit. This inpatient Mental Health Unit focuses on acute psychiatric care and response to children, adolescents and their families by the Child and Youth Mental Health Service (CYMHS.) I have been in professional practice in several parts of the world as a Child and Adolescent Psychiatrist specialist for more than 12 years.

The imminent closure of the Barret Adolescent Centre, BAC, is alarming for it will have far-reaching, detrimental implications. Adolescents with chronic, severe mental illness, that is, those at very high risk for completed suicide and physical aggression in the community, will have no longer have access to an appropriate level of care. This highly impaired adolescent population deserve an opportunity to receive long term, rehabilitative residential psychiatric care. These adolescents are comprised of those with genetic vulnerability to serious mental illness and those who are victims of childhood abuse and neglect, circumstances which lead to proven neurobiological deficits as a result of their environmental experiences. Withdrawal of the essential treatment modality, called residential treatment, such that BAC has provided for many of the patients I have evaluated locally, is short sighted at best and is in fact discriminatory towards mental illness and youth.

Closure of BAC is likely to result in the following for this psychiatrically disadvantaged adolescent population statewide:

- Increased number of completed suicides
- Increased suicide attempts
- Increased repeat admissions to the acute inpatient CYMHS unit
- · Increased length of stay in the acute inpatient CYMHS units
- Poorer outcomes in level of baseline functioning for adolescents as they transition into adulthood, leading to increased use of adult mental health services and increased provision of welfare support
- Treatment induced low self-esteem and isolation for adolescents in this chronic and severely disabled population, because they remain in an excessively restrictive level of care on an acute psychiatric inpatient unit, until their mental illness stabilizes. The

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- severity and chronicity of their illness means they could be living on an acute stay unit for months, alongside other less impaired adolescents who only need a brief stay.
- Increased likelihood of this untreated population becoming involved with juvenile justice system.

Additionally, adolescents with less severe psychiatric disturbance and general paediatric conditions will likely be detrimentally and directly affected as follows:

- There will be reduced availability of short stay, acute inpatient child and adolescent mental health beds, thus decreasing the availability of responsive psychiatric care to consumers and carers either side of the Brisbane River and beyond.
- There will be inappropriate use of acute paediatric inpatient beds, by mental health patients, as there will be insufficient numbers of mental health beds.
- Adolescents who require only a short acute inpatient hospitalization will now be at increased risk of exposure to many patients with much more severe and prolonged mental illness, thus amplifying the symptoms of the lower risk group, through contagion, a well-known phenomenon in adolescent mental health.

Many of these concerns are shared by my colleagues, who also register their alarm on behalf of the mentally ill adolescents of Queensland. I would add that provision of only one 12 bed residential psychiatric care unit for adolescents, such as BAC, mandated to serve the whole of Queensland is already woefully inadequate to meet the psychiatric needs of the adolescent population.

Sincerely,







Office of the Minister for Health

Level 19 147-163 Charlotte Street Brisbane 4000 GPO Box 48 Brisbane Queensland 4001 Australia

1 9 NOV 2012

Dear

Thank you for your correspondence dated 12 November, 2012 to the Office of the Minister for Health, regarding your concerns with the closure of The Barrett Adolescent Centre at Wacol.

As you may be aware, from 1 July 2012, and under the direction of the new Queensland Government, 17 independent Boards have assumed accountability for the delivery of public hospital and health services that was previously provided by the Health Services Districts.

Each Board has enhanced control over local health service delivery and seeks greater local input from both clinicians and the community.

Accordingly, I have referred your correspondence to the Chair of the West Moreton Hospital and Health Board, Dr Mary Corbett for attention and reply direct.

Yours sincerely

Colleen Miller
Office Manager