

Mental Health Review Tribunal

2012–13 Annual Report

2012-13 Annual Report of the Mental Health Review Tribunal
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The Honourable Lawrence Springborg MP
Minister for Health
GPO Box 48
BRISBANE QLD 4001


Dear Minister

I am pleased to present the Annual Report 2012-2013 and financial information for the Mental Health Review Tribunal.

The report is made in accordance with the requirements of Section 487 of the *Mental Health Act 2000*.

Additional information is also available on the Tribunal's website,
www.mhrt.qld.gov.au.

Yours sincerely

Signed  Date 21st October 2013.

Barry Thomas
President, Mental Health Review Tribunal

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President's Report

This Annual Report provides the opportunity to outline activities of the Mental Health Review Tribunal (the Tribunal) for the year 2012 – 2013. The Tribunal must conduct timely and private hearings related to the human rights of involuntary patients with mental illness and/or an intellectual disability, consistent with the relevant legislation, the *Mental Health Act 2000* and the *Forensic Disability Act 2011*. The Tribunal must also take into consideration, unacceptable risk, community safety and the needs of victims.

This past year has held many challenges for the Tribunal to achieve our primary objectives. These include an office restructure I commenced to focus on the central role of the Tribunal and align activities with our strategic direction. This was soon followed by an office relocation. Dr Chris Davis MP, Assistant Minister for Health, joined a gathering of staff and Members to mark the office relocation and demonstrate the government's commitment to this area of mental health. Change occurred within the Authorised Mental Health Services which provide clinical reports and evidence for Tribunal hearings. The staff and members proactively met these challenges to ensure business continuity has not been disrupted during this period.

Tribunal business is a complex pattern of tasks and duties performed by administrative staff and Members to ensure that on any given day, six to fifteen venues can hear numerous matters. I am proud to say that efficiency was not only maintained, but improved in this period. The tribunal conducted more hearings than in any previous year. Further, the Tribunal's contribution towards voluntary redundancies, office relocation and increased matters was met within budget. That this Tribunal is robust enough to surmount these challenges is testament to the strengths in place within the Tribunal. I thank all staff and Members, both past and present, for their contribution to the Tribunal's strength and efficiency. A significant positive outcome is evidenced by Members showing enthusiasm for driving their own professional development. Our new office is particularly suited to this activity.

The Tribunal sits state-wide and has part-time Members in most major centres throughout Queensland. The increased ability to utilise video-conferencing to regional and remote venues provides the opportunity to efficiently conduct hearings. The Tribunal maintains, where possible, personal attendance of at least one Member at hearing venues to assist patients throughout the hearing.

Recruiting for the 2014 – 2017 Members term also commenced during the reporting period. Efforts have been made to recruit in regional and remote areas. This practice ensures efficient and economical hearings occur and utilises local representation and knowledge at hearings.

Significant challenges remain for the Tribunal in developing appropriate links with Hospital and Health Services and the newly formed Mental Health Commission. A review of the *Mental Health Act 2000* is also underway.

The Tribunal's progress will be guided by these developments and the Tribunal's role in safeguarding the rights of persons facing the challenge of mental illness.

Executive Summary

The 2012 -2013 year provided the Tribunal with many challenges. It is important to recognise the extraordinary efforts of staff and Members in building the Tribunal, expanding its reach, developing resources and stakeholder engagement networks since its inception in 2002.

A realisation that this growth could no longer remain financially viable has led to a significant reduction in full time equivalent staff over the last year. Whilst as a small business unit, we have struggled with such a significant reduction in staff, the process has allowed us to rethink the Tribunal and concentrate on our core business model, align activities to our strategic direction and encourage innovative practice to achieve our organisation's missions and goals.

The staff remain committed to this process and have demonstrated the ability to adapt through a period of significant change moving toward a business model of which we can be proud, both past and present staff, contributed significantly to this process. A number of challenges remain however, including the commitment to providing a better service for patients, the concentration of accountability of practice, increasing use of technology to reduce environmental waste and an increase in efficiencies provides the platform for the future.

Throughout this significant change some remarkable achievements are testimony to the tribunal and staff member's commitment to our objectives, including; reducing the adjournment rate to 14.2 percent of listed matters; completing the move of office space, within budget and in line with the government commitment to reduce private leasing arrangements; increasing the facilitation of videoconferencing of hearings in regional and remote areas; refining hearing processes to effectively manage the increase in matters and hearings; achieving a small budget surplus and converting MHRT DVDs to Auslan.

The restructure has also presented some challenges that remain outstanding and are a focus for the future, in particular, Master Classes for Members, consistency relating to the conduct of hearings and addressing staff turnover.

A number of initiatives were put in place during the 2012/13 year which will be the focus of the 2013/14 year. These include;

- Recruitment of Members for the 2014 -2017 term;
- Members being more accountable for the provision of peer based Learning and Development processes;
- Standardisation of hearing processes;
- The introduction of secure electronic transfer of hearing related documentation.

The *Mental Health Review Tribunal Strategic Plan 2012-2016* demonstrates the Tribunal's commitment to the government's objectives for the future. The vision, purpose and values of the strategic direction are consistent with government priorities, including budget integrity and responsibility, reducing waste and the development of an infrastructure that will ensure the business model remains consistent with the legislation and efficiently managing the growth in hearings.

Staff and Members of the Tribunal play significant roles in the development and review of the strategic plan to ensure that we remain customer focussed, have good governance, robust business practices and meet the needs of the community. The commitment to further reduce costs associated with the increased population and demand is evidenced by the promotion of innovative practices and the use of developing technology.

Matters

During the year, the Tribunal received 16884 matters with 11978 matters being listed for hearing. This represents a 4.5% increase on matters received from the previous financial year.

Matter Type	Count
Application to perform Electroconvulsive Therapy (ECT)	423
Application to perform ECT - emergency	127
Application for approval to move out of QLD	9
Application for Review	554
Confidentiality Order	39
Involuntary Treatment Order Review	8148
Involuntary Treatment Order 1st Review	5779
Forensic Patient Information Order - Application	20
Appeal on refusal to allow person to visit a patient	1
Fitness for Trial - 1st Review	9
Fitness for Trial - 2nd Review	4
Fitness for Trial - 4th Review	2
Fitness for Trial subsequent Reviews	15
Forensic Order (Disability) Review	57
Forensic Order (Disability) 1st Review	18
Forensic Order Review	1514
Forensic Order 1st Review	165
TOTAL	16884

Table 1

Outcomes

During the 2012/13 year, a 5% increase of outcomes of matters was achieved, equating to an average of an additional 3.5 outcomes per hearing day.

A full list of outcome types is provided in Appendix 2.

Adjournments

The adjournment rate was 14.2% of listed matters, the majority of these attributed to either a patient transferring from one service to another or the lack of evidence at the hearings. A breakdown of adjournments is provided in Appendix 2.

Forensic Reviews

During the year, 1433 Forensic Order reviews were conducted resulting in 90% of Forensic Orders being confirmed with limited community treatment.

A breakdown of forensic outcomes is provided at Appendix 2.

Forensic Disability (FDS) Decisions

Fifty Four (54) Forensic Order (Disability) decisions were made with 87% of these being the Forensic Order Disability is confirmed with limited community treatment.

Further FDS information is provided at Appendix 2.

Electroconvulsive Therapy (ECT) Information

The Tribunal experienced an 8.5 % reduction in ECT applications on the previous year. Of particular note is the significant reduction in applications being withdrawn prior to the matter being heard by the Tribunal.

ECT TYPE	Year 12/13	Year 11/12
ECT Emergency		
Applications Approved	102	124
Applications Refused	3	2
Applications Withdrawn Prior Hearing	15	38
General ECT		
Applications Approved	350	412
Applications Refused	7	20
Applications Withdrawn Prior Hearing	22	38
ECT Totals		
Applications Approved	452	478
Applications refused	10	22
Applications Withdrawn Prior Hearing	37	45

Table 2

Involuntary Treatment Orders (ITO)

The number of ITO matters for the reporting period was 12541. Of the matters that proceeded to hearing, (7266) 315 (5%) were revoked.

A breakdown of the ITO outcomes is provided at Appendix 2.

Attendance at Hearings

Patient attendance at hearings remains a focus for further attention, of 2907 matters relating to inpatient episodes of involuntary treatment, patients attended on 1843

occasions (63.4%). Of patients within the community, attendance was 2885 out of a possible 8790 matters (32.83%).

Other Attendees

During the year 3573 matters were attended by Psychiatrists, 2151 matters were attended by a doctor or registrar, 7817 matters were attended by a nurse and/or a case manager, 83 matters had cultural support present and 3511 matters had a patients allied person or other support present. 243 matters had patient lawyers in attendance.

Aboriginal / Torres Strait Islander Information

More than 60% of all matters heard, where the patient identified themselves as indigenous, included at least one indigenous member on the panel. Of the 1512 hearings, 315 were attended by the patient.

Indigenous mental health workers attended 143 matters. (Appendix 1a).

Appeals

Appeals relating to matters for the 2012-2013 year remain quite low at 66 out of the 11978 matters (0.55%). Of significance is that successful appeals (9) represent 0.08% of all matters. Patients appealed on 48 occasions, the Attorney General on 16 occasions and one appeal each were by a patient lawyer and an allied person.

Statement of Reasons

Statements of reasons requests have increased around 50% for the 12-13 year on the 11- 12 year. Following consultation, the level of SOR requests per month has returned to the normal rate of requests over the previous years.

Requesting Body	Decision at Hearing	Count of Requests
Attorney General	Application for review is heard [HEARING]	3
Attorney General	Confidentiality Order is made [HEARING]	1
Attorney General	Forensic Order (Disability) is confirmed with LCT [HEARING]	2
Attorney General	Forensic Order (Disability) is revoked [HEARING]	3
Attorney General	Forensic Order is confirmed [HEARING]	2
Attorney General	Forensic Order is confirmed with LCT [HEARING]	154
Attorney General	Forensic Order is revoked [HEARING]	67
Attorney General	ITO is confirmed [HEARING]	1
Attorney General	ITO is confirmed with LCT [HEARING]	1
Attorney General	ITO is revoked [HEARING]	1
Attorney General	Person is fit for trial [HEARING]	1
Attorney General	Group Total	236
Director of Mental Health	App for patient to move out of QLD approved [HEARING]	1
Director of Mental Health	Application to administer ECT is refused [HEARING]	1
Director of Mental Health	Forensic Order (Disability) is confirmed; LCT revoked [HEARING]	1
Director of Mental Health	Forensic Order is confirmed [HEARING]	1
Director of Mental Health	Forensic Order is confirmed with LCT [HEARING]	4
Director of Mental Health	Forensic Order is revoked [HEARING]	5
Director of Mental Health	Forensic order confirmed. LCT revoked [HEARING]	1
Director of Mental Health	ITO is revoked [HEARING]	1
Director of Mental Health	Group Total	15
Mental Health Court	Application is heard [HEARING]	1
Mental Health Court	Application to administer ECT is approved [HEARING]	8
Mental Health Court	Forensic Order (Disability) is confirmed; LCT revoked [HEARING]	1
Mental Health Court	Forensic Order is confirmed with LCT [HEARING]	13
Mental Health Court	ITO is confirmed [HEARING]	25
Mental Health Court	Group Total	48
Patient	Application for review is heard [HEARING]	3
Patient	Application to administer ECT is approved [HEARING]	6
Patient	Forensic Order (Disability) is confirmed with LCT [HEARING]	2
Patient	Forensic Order is confirmed [HEARING]	2
Patient	Forensic Order is confirmed with LCT [HEARING]	24
Patient	Forensic Order is revoked [HEARING]	4
Patient	Forensic order confirmed. LCT revoked [HEARING]	1
Patient	ITO is confirmed [HEARING]	100
Patient	ITO is revoked [HEARING]	9
Patient	Person is fit for trial [HEARING]	2
Patient	Group Total	153
Grand Total		452

Table 3

Gender Equality

The *Mental Health Act* 2000 (S440) requires that gender balance of members be taken into account. Table 4 presents the breakdown of gender and category of members who conducted Tribunal hearings throughout the 2012- 2013 financial year.

Category	Men	Woman	Total
Community	7	19	26
Legal	15	11	26
Psychiatrist	11	19	30
Totals	33	49	82

Table 4

Human Resources

A restructure of the Tribunal during the financial year 2012- 2013 resulted in six redundancies and the abolition of one additional temporary position. The current Full Time Equivalent is 22 positions in addition to the President. Consideration is being given to the establishment of a Deputy President / legal member position. The retention rate of employees throughout the restructure was 77% with a permanent separation rate through the year of approximately 21%.

Financial Information

Items	Expenditure	Budget	Variance
Staff Salaries	\$2,002,262	2,666,072	\$663,810
Members Fees	\$3,425,316	2,800,000	-\$625,316
Payroll Tax	\$288,655	284,634	-\$4,021
Temporary Relief Staff	\$64,797	160,000	\$95,203
Superannuation	\$546,980	526,759	-\$20,221
Fringe Benefit Tax	\$7,051	10,000	\$2,949
Work Cover Premium	-\$2,003	63,075	\$65,078
Separation Packages	\$400,861	0	-\$400,861
Total Salary & related Expense	\$6,733,919	\$6,510,540	-\$223,379
Advertising recruitment	\$10,429	25,000	\$14,571
Accommodation / Rent	\$401,148	686,000	\$284,852
Energy	\$7,436	18,000	\$10,564
Hospitality	\$2,202	6,009	\$3,807
Legal & Professional Expenses	\$26,293	25,000	-\$1,293
Computer / I.T. Expenses	\$49,758	115,603	\$65,845
Library Audio Visual expenses	\$318.91	5,000	\$4,681
Freight / Postage	\$75,417	85,000	\$9,583
Motor Vehicles	\$11,850	20,000	\$8,150
Printing and stationary	\$59,266	85,000	\$25,734
Learning & Development	\$37,582	65,000	\$27,418
Telecommunications & Video Conferencing	\$71,998	35,000	-\$36,998
Travel	\$206,697	345,000	\$138,303
Household	\$12,765	26,428	\$13,663
Minor Works	\$3,216	26,428	\$23,212
Repairs, Maintenance Building & Plant	\$142,341	89,144	-\$53,197
Interpreter	\$17,826	20,000	\$2,174
External Medical Reports	\$92,198	95,000	\$2,802
Totals Administration	\$1,033,105	1,541,437	\$508,332
Totals Plant & Equipment	\$195,315	231,175	\$35,859.92
Total	\$7,962,658	8,283,152	\$320,494

Table 5

Note: The Tribunal has been previously overcharged for WorkCover expenses. A Credit was received by the Tribunal in relation to this.

The total operating budget for 2012-2013 was \$8,283,152. A surplus was realised of \$320,494. This surplus was largely due to a delay in rental finalisation through DPWH of an additional \$220,000, which will now occur in the next financial year in addition to an IT related sum of \$40,000 resulting from the change of tenancy.

Including these costs, the Tribunal would have realised a surplus of circa \$60,000. Increases in costs associated with the change in tenancy are evident, however, travel was significantly less than expected due to a greater emphasis on Video Conferencing. The Tribunal's commitment to maintaining a good ratio of members being physically present with the patient has not been compromised by the increase in the use of Video Conferencing.

Noticeably, printing and stationary was also under budget, mostly related to gaining greater efficiencies through the use of emerging technology.

The repairs and maintenance over-spend by \$53,000 was the result of the “Make Good” for the previous tenancy. Telecommunications costs also exceeded budget with the increase of Video Conferencing units.

The associated reduction of travel costs produces significant savings and should continue to do so in the future. Members’ wages were over budget, partially due to the rise in Statements of Reasons and also due to the development day, focussed on standardisation and future planning, in which a large number of current members took part.

This provided a great opportunity for members to visit the new premises and understand how Tribunal business will be conducted into the future. Some interviews for the Membership term (2014-2017) were conducted around this event, which will result in a reduction in travel costs in the current year.

The Tribunal experienced nil effect due to foreign exchange.

A program of redundancies was implemented during 2012-13. During the period, six employees received redundancy packages at a cost of \$400,860.73. Employees who did not accept an offer of a redundancy were offered case management for a set period of time, consistent with Human Resources guidelines. During the period, 0 employees received retrenchment packages at a cost of \$0.

Appendix 1 – State-wide Activity

LOCATION	Appendix 1. State Wide Activity Report AMHS Breakdown 2012 - 2013																							
	Number of Sittings	Number of Hearings	Hearings/Tribunal	Number of Adjournments	% Hearings Adjourned	Number of Forensic Orders Reviewed	Number of ITOs Reviewed	Number of ECT	Total Matters	Overdue Matters	% Overdue Matters	Reports Greater than 6 Days Prior Hearing	Reports received 3 to 6 Days Prior Hearing	Report Received 1 to 2 Days Prior Hearing	Report Received on Hearing Day	Report Received After Hearing	No Clinical Report Received	Psychiatrist Attended Hearing	Registrar Or Other Doc Attend	Nurse and Case Manager Attend Hearing	Cultural Support Attend Hearing	Inpatient Attend Hearing	Outpatient Attend Hearing	Allied Person / Other Support Attend Hearing
BAYSIDE	54	387	7.2	45	11.2	41	334	12	403	24	6	172	114	21	30	0	12	165	138	202	0	63	86	88
BELMONT PRIVATE	27	71	2.6	20	24.7	1	56	15	81	3	3.7	20	12	4	5	1	3	88	2	12	0	22	7	22
BUNDABURG	30	177	5.9	27	15.2	23	146	7	178	6	3.4	147	6	7	5	0	3	119	15	137	1	20	64	71
CAIRNS	118	978	8.3	187	18.5	114	834	26	1011	34	3.4	279	280	132	70	3	134	201	122	679	11	87	226	230
FORENSIC DISABILITY SERVICE	7	20	2.9	2	8	0	1	0	25	0	0	17	2	0	3	0	1	0	4	19	0	15	3	43
FRASER COAST	39	220	5.6	39	16.4	25	190	6	238	10	4.2	146	36	17	15	0	6	110	20	167	2	18	78	73
GOLD COAST	142	1148	8.1	198	16.6	117	1003	32	1192	38	3.2	405	271	178	157	8	81	276	245	831	2	171	281	261
GREENSLOPES PRIVATE HOSPITAL	2	2	1	0	0	0	2	0	2	0	0	1	1	0	0	0	0	2	0	1	0	0	1	1
LOGAN - BEAUDESERT	102	753	7.4	93	11.8	94	635	17	791	7	0.9	225	194	149	98	7	46	124	91	576	5	68	207	201
MACKAY	38	251	6.6	29	11.1	37	213	2	261	4	1.5	197	37	4	0	0	8	182	20	196	3	26	106	81
MATER CHILDRENS HOSPITAL	9	11	1.2	3	27.3	0	10	0	11	0	0	0	5	0	2	0	1	4	3	4	1	5	1	8
M.H.R.T OFFICE	6	6	1	0	0	1	3	0	6	1	16.7	0	0	0	1	0	2	4	0	0	0	0	1	3
NEW FARM CLINIC	25	45	1.8	4	8.9	1	42	2	45	0	0	2	9	11	14	0	3	70	1	0	0	13	8	8
ONCALL	64	231	3.6	32	10.9	13	96	117	294	4	1.4	17	32	15	38	0	26	132	100	82	3	111	12	94
PRINCESS ALEXANDRA HOSPITAL	155	1050	6.8	204	18.3	158	841	58	1114	13	1.2	324	318	73	161	13	93	212	175	704	3	117	289	293
ROYAL BRISBANE & ROYAL WOMANS HOSPITAL	158	1322	8.4	192	14.1	130	1151	53	1364	26	1.9	371	256	42	459	15	65	316	227	875	2	148	318	182
REDCLIFFE-CABOULTURE	75	460	6.1	91	18.6	75	380	11	488	7	1.4	73	109	144	68	13	38	220	51	330	2	71	151	185
ROCKHAMPTON	45	382	8.5	54	13.8	51	331	2	392	10	2.6	164	174	0	28	0	9	152	34	300	1	27	130	93
SUNSHINE COAST & GYMPIE	100	584	5.8	91	14.4	77	506	13	632	13	2.1	110	113	30	215	15	79	198	76	445	14	79	166	142
THE PARK CENTRE FORM MENTAL HEALTH	66	388	5.9	38	8.8	197	177	19	431	8	1.9	217	93	52	20	0	11	230	233	153	3	222	29	273
TOOWONG PRIVATE HOSPITAL	14	35	2.5	7	18.9	0	32	4	37	2	5.4	10	12	1	2	0	4	40	2	10	0	4	8	13
TOOWOOMBA	103	729	7.1	104	13.4	151	549	26	776	46	5.9	254	245	107	78	0	28	230	212	535	2	200	191	364
TOWNSVILLE	94	688	7.3	97	13.2	140	531	20	735	23	3.1	328	162	71	33	5	60	189	104	522	18	155	148	308
THE PRINCE CHARLES HOSPITAL	106	786	7.4	85	10.3	107	625	54	824	24	2.9	333	235	75	42	7	34	208	154	554	10	129	196	281
WEST MORETON	85	619	7.3	60	9.3	101	508	8	646	10	1.5	231	181	138	53	0	12	102	122	485	0	72	179	193
TOTAL	1664	11343	6.80%	1702	14.20%	1654	9196	504	11977	313	2.60%	4043	2897	1271	1597	87	759	3574	2151	7819	83	1843	2886	3511
Percent	13.9	94.7	6.80%	14.2	14.20%	13.8	76.8	4.2	100	2.6	2.60%	37.16	26.63	11.68	14.68	0.8	6.98	32.9	19.8	71.9	0.8	16.9	26.5	32.3

Appendix 1a Indigenous Report

LOCATION	UNIQUE PAT #	HEARINGS	ADJOURNMENTS	# F.O REVIEWS	# I.T.O REVIEWS	FDS Application #	MATTERS HEARD	#CULTURAL INFO PAGE COMPLETE	PATIENT ATTEND	IMHW ATTEND	CULT SUPP ATTEND	INDIGENOUS MEMBER ATTEND
BAYSIDE	12	26	5	4	21	0	27	0	5	0	0	7
BUNDABURG	13	23	4	2	22	0	24	1	6	0	1	12
CAIRNS	178	360	63	42	313	2	363	70	72	28	10	358
FORENSIC DISABILITY SERVICE	5	10	2	0	1	10	12	9	2	0	0	9
FRASER COAST	11	19	2	2	18	0	20	0	5	3	2	7
GOLD COAST	21	40	6	2	36	0	43	0	8	1	1	10
LOGAN - BEAUDESERT	33	61	10	18	43	0	67	8	17	2	4	29
MACKAY	25	53	6	9	42	2	54	4	20	5	4	23
MATER CHILDRENS HOSPITAL	1	1	1	0	1	0	2	0	0	0	0	0
M.H.R.T OFFICE	2	2	0	0	1	0	2	0	0	0	0	0
NEW FARM CLINIC	1	1	0	0	2	0	2	0	0	0	0	0
ONCALL	21	21	7	3	15	0	26	0	1	0	2	0
PRINCESS ALEXANDRA HOSPITAL	37	74	18	10	59	3	76	12	18	0	1	34
ROYAL BRISBANE & ROYAL WOMANS HOSPITAL	37	69	16	4	64	0	70	5	5	2	1	31
REDCLIFFE-CABOULTURE	24	45	7	7	40	0	47	9	15	1	1	12
ROCKHAMPTON	47	95	14	12	82	0	95	2	23	10	2	53
SUNSHINE COAST & GYMPIE	18	31	4	8	23	0	34	3	4	4	12	12
THE PARK CENTRE FORM MENTAL HEALTH	26	54	4	22	30	0	59	3	6	3	1	31
TOOWONG PRIVATE HOSPITAL	1	1	1	0	2	0	3	0	2	0	0	0
TOOWOOMBA	76	147	24	35	112	0	154	1	33	31	2	105
TOWNSVILLE	130	256	44	71	183	2	284	74	47	46	13	161
THE PRINCE CHARLES HOSPITAL	28	55	10	12	42	0	56	1	12	7	5	14
WEST MORETON	32	68	11	18	52	0	72	1	14	0	0	25
TOTAL	779	1512	259	281	1204	19	1592	203	315	143	62	933
PCT %	51.52	94.97	17.13	18.58	79.63	1.26	100	13.43	20.83	9.46	4.1	61.71

Appendix 2 – Outcomes of Matters

Outcome Type	Count
Adjourned more than 28 days [HEARING]	105
Adjourned 28 days (Pt AWOP) [HEARING]	95
Adjourned more than 28 days (Examination Order) [HEARING]	56
Adjourned more than 28 days (Pt AWOP) [Hearing]	75
Adjourned more than 28 days (Transferred) [HEARING]	72
Adjourned 61 days [HEARING]	1
Adjourned 61 days (Examination Order) [HEARING]	1
Adjourned 61 days (Transferred) [HEARING]	4
Adjourned 28 days (AMHS Request) [HEARING]	103
Adjourned 28 days (Lack of Evidence) [HEARING]	408
Adjourned 28 days (Other) [HEARING]	109
Adjourned 28 days (Patient Request) [HEARING]	175
Adjourned 28 days (Procedural Fairness) [Hearing]	178
Adjourned 28 days (Patient Transferred) [HEARING]	323
App for patient to move out of QLD refused [HEARING]	2
Application is dismissed [HEARING]	12
Application is heard [HEARING]	389
App for patient to move out of QLD approved [HEARING]	2
Appeal Upheld - FO revoked [MATTER]	2
Appeal Upheld - ITO revoked [MATTER]	3
Appeal Withdrawn [MATTER]	1
Application withdrawn [MATTER]	49
Charges discontinued [MATTER]	1
Confidentiality Order is made [HEARING]	24
Confidentiality Order is refused [HEARING]	11
Confidentiality Order submission not taken into account [HEARING]	3
Patient is Deceased [MATTER]	57
Application to administer ECT is approved [HEARING]	452
Application to administer ECT is refused [HEARING]	10
Application to perform ECT is withdrawn [MATTER]	37
FIO is made - Confidentiality Order NOT Made (President) [MATTER]	4
FIO is made with Confidentiality Order (President) [MATTER]	5
FIO is NOT made (President) [MATTER]	4
FIO is made (President) [MATTER]	8
FIO is revoked (President) [MATTER]	1
Person is fit for trial [HEARING]	6
Forensic Order (Disability) is confirmed [HEARING]	1
Forensic Order (Disability) is confirmed with LCT [HEARING]	47
Forensic Order (Disability) is confirmed; LCT revoked [HEARING]	1
Forensic Order (Disability) is confirmed with LCT with Transfer of Patient [HEARING]	2
Forensic Order (Disability) is revoked [HEARING]	3
Forensic Order ceased under S 219 [MATTER]	4
Forensic order confirmed. LCT revoked [HEARING]	12
Forensic Order is confirmed with LCT [HEARING]	1291
Forensic Order is confirmed [HEARING]	41
Forensic Order is revoked [HEARING]	85
ITO confirmed. Category changed to Community [HEARING]	2
ITO confirmed. Category changed to Inpatient [HEARING]	17
ITO ceased to have effect [MATTER]	43
ITO ceased Forensic Order made [MATTER]	69
ITO is confirmed [HEARING]	7237
ITO is confirmed with LCT [HEARING]	10

Outcome Type	Count
ITO is revoked [HEARING]	315
ITO is revoked [MATTER]	4838
ITO is invalid [MATTER]	10
Person is not fit for trial [HEARING]	10
Person is not fit for trial and is unlikely to be fit for trial in a reasonable time [HEARING]	6
Decision of the administrator is confirmed to refuse a person to visit a patient [HEARING]	1
TOTAL	16833
<i>*Please note: The MHRT does not hear appeals; however the items entered as appeals are entered in our systems as outcomes.</i>	

Appendix 3 – Abbreviations

AMHS – Authorised Mental Health Service
AG – Attorney General
App – application
CO – Confidentiality Order
DMH – Director of Mental Health
ECT – Electroconvulsive Therapy
EO – Examination Order
FDS – Forensic Disability Service
FFT – Fit for Trial
FIO – Forensic Information Order
FO – Forensic Order
FO (Disability) – Forensic Order (Disability)
FTE – Full Time Equivalent
ILO – Indigenous Liaison Officer
IMHW – Indigenous Mental Health Worker
ISO – International Standards Organisation
ITO – Involuntary Treatment Order
KPI – Key Performance Indicator
LCT – Limited Community Treatment
MHA2000 – Mental Health Act 2000
MHC – Mental Health Court
MHRT – the Mental Health Review Tribunal
NFFT – Not fit for trial
NGO – Non-Government Organisation
Psych – Psychiatrist
QH - Queensland Health
SNFP – Special Notification Forensic Patient