Hon Ljiljanna Ravlich to the Minister for Mental Health.

I refer to the Matters to be reported to the Chief Psychiatrist - Deaths and Serious Incidents Reporting. Using the reporting form to frame my question, I ask the Minister to provide the following information:

1. How many deaths were reported to the Chief Psychiatrist in 2011 and up until 30 July 2012 (19 months)?
2. How many incidents were reported to the Chief Psychiatrist in 2011 and up until 30 July 2012 (19 months)?
3. Of those incidents reported in any mental health service/facility for each of the following categories:
   (a) alleged aggression/assault;
   (b) sexual assault;
   (c) medication issue;
   (d) absconding of the individual;
   (e) alleged criminal activity;
   (f) other.
   Please list the items that have been reported under "other".

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**Answer**

1. 327 deaths reported from January 2011 to end of July 2012 (19 months).
2. 265 incidents were reported to the Chief Psychiatrist from January 2011 to end of July 2012 (19 months).
3. (a) 39 alleged aggression/assault
   (b) 16 alleged sexual assault
   (c) 19 medication issue
   (d) 86 absconding
   (e) 15 alleged criminal activity
   (f) other

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Question on notice:

Legislative Council 14 August 2012
(4) Other see tabled papers [...]
### Question on Notice 5884: (4 i-viii)

**Patient Self-harm**

- Inappropriate behaviour/communication: 13
- Policy/process issue: 11
- Bed availability: 8
- Patient/staff physical injury: 8
- Environment /facilities issue: 5
- Transport issues: 4
- Potential Litigation issue: 2

**Notes:**

<table>
<thead>
<tr>
<th>No.</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Potential Litigation issue</td>
</tr>
<tr>
<td>4</td>
<td>Transport issues</td>
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<td>5</td>
<td>Environment/physical injury</td>
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<td>8</td>
<td>Policy/process issue</td>
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<td>11</td>
<td>Bed availability</td>
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<td>13</td>
<td>Inappropriate behaviour/commun.</td>
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<tr>
<td>39</td>
<td>Patient Self-harm</td>
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</tbody>
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(4) (i) Reports are received from Public, Private and Non-Government Agencies.

(ii) Reports are recorded by the date of reporting to the Chief Psychiatrist. They are recorded prior to any investigation which may change or contain a category.

(iii) The purposes of services reporting matters to the Chief Psychiatrist are to support his function under the Mental Health Act (1996), to monitor standards of psychiatric care and to understand the contemporary information on events and issues as they occur, not for precise demographic or statistical reporting.

(v) Reporting to the Chief Psychiatrist may be incomplete or may require additions or deletions as a later date. The figures do not represent the absolute numbers of incidents and issues; the figures represent reporting prior to any investigation which may change or contain a category.

(vi) Deaths and Serious Incidents may not be reported in the month they allegedly occurred.

(vii) Deaths are reported prior to any investigation as to their cause or any Coronial Inquiry and findings being handed down. It replaces the Coroner’s certification of cause of death. The Coroner’s certification of cause of death was from expected physical causes or was an unexpected death.

(4) (viii) Deaths are reported prior to any investigation as to any cause or any Coronial Inquiry and findings being handed down. It replaces the Coroner’s certification of cause of death. The Coroner’s certification of cause of death was from expected physical causes or was an unexpected death.
The Chief Psychiatrist receives reports of serious incidents, non-serious incidents, and issues. The reported non-serious incidents and issues are deliberately included in the Chief Psychiatrist's reporting requests for a number of reasons:

- It provides a more comprehensive overview of current incidents and issues in WA than reports of serious incidents alone.
- It allows for detection of incidents and issues which have the potential to become serious if not prevented by early intervention.
- Broader reporting allows for differences in opinion as to which constitutes a serious incident or issue as, for example, what a reporting clinician regards as a non-serious incident or issue may be deemed as more serious when a number of these events occur and incidents and issues which may be regarded as non-serious as individual events may be deemed as more serious when a number of these events may occur together.
- It provides a detection system whereby incidents and issues which have the potential to become serious are prevented by early intervention.
- It provides more comprehensive reviews of current incidents and issues and incidents and issues of serious incidents, non-serious incidents, and issues.
Matters to be reported to the Chief Psychiatrist

Serious Incident

1. Date (of form completion):

Details of person reporting

2. Name of staff member reporting:

3. Position of staff member reporting:

4. Name of Health Service Region:

5. Name of Mental Health Service:

Details of the alleged serious assault:

6.a) Are you reporting an alleged sexual assault:

- Yes
- No (If ‘No’, go to Question 7)
- Unsure (If ‘Unsure’, go to Question 7)

6.b) Who was involved in the alleged sexual assault:

- Patient(s):
- Visitor(s):
- Staff member(s):
- Other:

- Allegedly Seriously Assaulted:
- Allegedly Seriously Assaulted by:

Details of the Serious Incident:

7.a) Are you reporting an alleged sexual assault:

- Yes
- No (If ‘No’, go to Question 8)
- Unsure (If ‘Unsure’, go to Question 8)

Please tick all boxes that apply, and enter names of persons involved where known.

Please complete this form ELECTRONICALLY by tabbing/entering on the fields, it email to:

mentalhealthsentinel@health.wa.gov.au
Are you reporting alleged criminal activity?

Details of the breach of the MHA:

Yes, Section 14(1) N/A
Unsure, Section 14(1) N/A
No, Section 14(1) N/A
Yes, Section 14(1) N/A
Yes, admission error

Are you reporting a breach of the MHA?

Details of the alleged sexual assault:

Staff member(s):
Patient(s):
Visitor(s):
Other:

Who was involved in the alleged sexual assault?

Allegedly Sexually Assaulted by:

Staff member(s):
Patient(s):
Visitor(s):
Other:

Details of the alleged sexual assault:

(Where the alleged sexual assault involves a patient, please include full name of patient, DOB, address and status. Please also include name(s) of other person(s) involved and health service(s) involved, if relevant)

Are you reporting a medication issue in regard to a mental health patient which may require review?

Yes
Unsure (If 'Unsure', go to Question 9)
No (If 'No', go to Question 9)
N/A (If 'N/A', go to Question 9)

Details of the serious medication error:

Are you reporting an absconding of a patient?

Yes
Unsure (If 'Unsure', go to Question 10)
No (If 'No', go to Question 10)
N/A (If 'N/A', go to Question 10)

What was the status of the patient who absconded?

Select answer

Was the patient at serious risk of harm?

Yes, at risk of self harm
Yes, at risk of harm to others
No
Unsure
N/A

Details of the absconding of a patient:

Are you reporting a breach of the MHA?

Yes, administration error
Yes, serious misuse
Yes, serious misapplication

Are you reporting a medication issue in regard to a mental health patient which may require review?

Yes
Unsure (If 'Unsure', go to Question 11)
No (If 'No', go to Question 11)
N/A (If 'N/A', go to Question 11)

Details of the breach of the MHA:

Yes, Section 14(1) N/A
Unsure, Section 14(1) N/A
No, Section 14(1) N/A
Yes, Section 14(1) N/A
Yes, admission error

Are you reporting a breach of the MHA?

Details of the alleged sexual assault:

Staff member(s):
Patient(s):
Visitor(s):
Other:

Who was involved in the alleged sexual assault?

Allegedly Sexually Assaulted by:

Other:
Visitor(s):
Patient(s):
Staff member(s):

Please tick all boxes that apply, and enter names of persons involved where known.

Office of the Chief Psychiatrist

Draft 17 August 2007
18. Factors that implicate the standard of mental health care:

17. Information relating to community members:

16. Information relating to relatives or carers:

15.b) Any other information relating to Audit and Accountability, DoH:

14.b) Any other information relating to police involvement:

13.b) Any other information relating to media interest:

12. Information relating to Serious Incident:

11.b) Details of the alleged criminal activity:

N/A □
Unsure □
Audit and Accountability, DoH is not involved □
Audit and Accountability, DoH is not yet involved but it is anticipated they will be involved □
Audit and Accountability, DoH is involved □

15.a) Information about Audit and Accountability, DoH:

14.a) Information about police involvement:

13.a) Information about media interest:

12.a) Information about Serious Incident:

11.a) No if 'No', go to Question 12.

Unsure (if 'Unsure', go to Question 12)

No if 'No', go to Question 12

Yes □

Unsure (if 'Unsure', go to Question 12)

N/A □
Unsure □
Police are not involved □
Police are not yet involved but it is anticipated they will be involved □
Police are involved □

14.a) Information about police involvement:

13.a) Information about media interest:

12.a) Information about Serious Incident:

11.a) No if 'No', go to Question 12.

Unsure (if 'Unsure', go to Question 12)

No if 'No', go to Question 12

Yes □

Unsure (if 'Unsure', go to Question 12)

N/A □
Office of the Chief Psychiatrist

19.a) Information about RCA:

- RCA has been completed (please email RCA to janet.peacock@health.wa.gov.au)
- We intend to complete a RCA (please email RCA to janet.peacock@health.wa.gov.au)
- We do not intend to complete a RCA
- Unsure
- N/A

19.b) Any other information relating to RCA:

Comments

20. Any other comments:

Comments

Please email completed form to mentalhealthsentinel@health.wa.gov.au.

This form is available electronically at www.chiefpsychiatrist.health.wa.gov.au.

On receipt of initial notification, the Office of the Chief Psychiatrist will provide the hospital with a Mental Health Sentinel Event Reference Number, to be indicated on Correspondence regarding this serious incident.

Please contact the Office of the Chief Psychiatrist if you have any questions regarding this process.

Phone: (08) 9222 4462

janet.peacock@health.wa.gov.au

Office of the Chief Psychiatrist - Serious Incident

Matters to be reported to the Chief Psychiatrist

17 August 2007

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