

Upper House Inquiry into Mental Health Services in NSW

Equity, accessibility, and appropriate delivery of outpatient and community mental health care in New South Wales

Question and interchange:

The Hon. GREG DONNELLY: Thank you very much, Doctor, for coming along and your submission, which is very helpful. My question's very general in nature. You might take it on notice if you feel you need more time to answer it. But, if you can, answer it now. Specifically with respect to children and young people and the matter of mental health, in trying to help understand what's required in terms of both the individual clinicians involved and the time required to make a diagnosis of a young person who—I shall use the term—as a patient comes along with a mental health or supposedly mental health challenge, what are we looking at, not what that's actually happening in the way you've described how things are—very, in some respects, dysfunctional and underfunded et cetera—but what would it take, as a professional, as a minimum requirement or a minimum amount of time and investment to undertake that diagnosis to find the morbidities or comorbidities, just to give us a benchmark of sorts?

I mean it as a genuine question. I know it's almost theoretical in some sense. Obviously, with the dearth of resources and those coming forward for training and all these complexities that you've raised—take them as all valid—we, obviously, want to achieve an improvement, but achievement against what are the benchmarks or minimum requirements required that we should be trying to move towards?

ANGELO VIRGONA: It's such a big question. I'll take it half on notice. I'm give you half an answer. I think being able to provide a coherent, organised, multidisciplinary assessment of someone is really difficult. We're trying to do that, I think, with the Safeguards model in New South Wales so that kids are getting a more comprehensive assessment through that program. I think that that's the sort of thing that would be required across the age ranges, really. Who does it? Who's going to do that? This is the problem.

We've got from the GP who doesn't have time to see people to perform a comprehensive assessment, if they felt that they had the skills, through to psychologists, if you can access them now, psychiatrists, if you can access them now, the community mental health team, who will not really perform assessments of people from a diagnostic perspective unless there's some sort of crisis that's occurring in that person's life or they're being looked after under the Mental Health Act with a community treatment order. There are so many people. Pat McGorry called them the "missing middle". I call them the "missing severe" because if we say "middle", we think they have middling problems, but they do not. They have moderate to severe mental health problems, and these are the people who fall through the gaps such that they're not getting that comprehensive approach.

Reflecting on the question, I hope the following details provide the information that was sought.

Each presentation needs to be assessed on its merits. A young person in crisis, with an uncomplicated background, may require only a simple assessment, but such presentations are increasingly the exception. Young people are presenting with more complex mental health issues and more complex social issues. This leads to the need for multidisciplinary assessments. The core ingredients of such assessments would include:

- A straightforward psychiatric assessment of the individual can be conducted over 1-2 hours and reach provisional diagnoses.
- But with the assessment of young people, corroborative information is usually required to come to firmer conclusions about diagnosis/diagnoses and about the next steps in the management of the condition/s. This information would be sought from a range of clinicians/services, including GP's, parents, carers, school counsellors, psychologists, and other agencies involved in their care. Collating that information may take some hours.
- If there are questions as to neurodiversity or intellectual capacity, then neuropsychological assessments may also be required, which may take up to 4 hours.
- Social work assessments and occupational therapy assessments may also be required depending on the presentation and range of issues. These may take anything from 1-3 hours each.

Angelo Virgona