

What does it mean?

Treatment authorities authorise your treatment for mental illness without your consent, including:



Medications



Appointments and follow up by your treating team



Hospital admission (sometimes)

Normally, you will be on a **treatment authority—community** category, which means you can live at home.

You should only be on a **treatment authority—inpatient** category if your treatment and care needs OR your safety and welfare, OR the safety of others cannot be met living in the community.

Who makes it?



A **psychiatrist** at hospital can make a treatment authority.



The psychiatrist's decision will be reviewed by the **Mental Health Review Tribunal** within 28 days, then 6 months later, then another 6 months later, and then every 12 months. You can also apply for an early review.



You can appeal the Tribunal's decision to the **Mental Health Court** within 60 days. The Court's decision is final.

When will it be made?

To be put on a treatment authority, a person must:

1

Have a **mental illness**



There must be evidence of symptoms of a mental illness. If symptoms have a different explanation, such as religious beliefs or drug usage, there may not be a mental illness. Symptoms do not need to be current, especially if they are managed by medication.

AND

2

Not have **capacity to consent** to treatment for the illness



Everyone is presumed to have capacity unless proven otherwise. Capacity does not mean you have to agree with treatment, but that you understand the purpose, benefits, and risks, and the consequences of no treatment. Capacity must be stable, not fluctuating.

AND

3

Because of the illness, without involuntary treatment, there is likely to be **imminent serious harm** to the person or others OR **serious mental or physical deterioration** of the person



Is there evidence of particular risk that is imminent (immediate, impending) and serious (important, significant)? Or is serious deterioration likely?

There may be factors that protect against risk or deterioration, such as family support, a willingness to receive treatment, or a plan to manage mental health in other ways (GP, private psychiatrist/psychologist)

AND

4

There is **no less restrictive way** for the person to receive treatment and care.



A treatment authority should not be made if consent for treatment can be given under an advance health directive, by a guardian, an enduring power of attorney or a statutory health attorney.

When will it be stopped (revoked)?

While on a treatment authority, you must be assessed by a psychiatrist at least every 3 months. If the psychiatrist does not think you meet the test for a treatment authority, then they must stop the treatment authority.

Sometimes **speaking openly** with your treating team and **listening** to what they say, and **coming up with a plan** can be the best way of getting treatment you are happy with and coming off your treatment authority.

The **Mental Health Review Tribunal** and the **Mental Health Court** can also stop your treatment authority.

But they cannot make decisions about what medications you get (or dosage), who your doctor or case manager is, and they rarely interfere with decisions about leave or discharge from hospital.

MHRT hearings

Reviews are like conversations between you, your treating team and the Tribunal members. The treating team will prepare a **clinical report**, which must be given to you 7 days before your hearing. You should read this report.

You can be supported by a lawyer or other representative, and/or a support person. But the Tribunal wants to hear from **YOU**. It can help to put your views in writing, by completing a self report, as well as any support letters and reports

The Tribunal can confirm or revoke the treatment authority, they cannot make decisions about the treatment you receive under that authority.

If you want to appeal the Tribunal's decision, it is a good idea to ask the Tribunal for a **statement of reasons** and **get advice from a lawyer** about your chances of success (e.g. Legal Aid Qld).

What about problems with medication or treatment?

It is important that you raise this with your treating team. An **Independent Patient Rights Adviser** (contact your Hospital & Health Service) might be able to help you communicate your views.

If your concerns are not resolved, you could:

- ◆ Ask for a second opinion;
- ◆ Make a complaint through your Hospital & Health Service **Patient Liaison Officer**;
- ◆ Make a complaint to the **Health Ombudsman** (www.oho.qld.gov.au; 133 646). There is usually a 2 year time limit on complaints.



Need help?

If you would like more information or legal advice about treatment authorities, or would like representation at the Mental Health Review Tribunal, please contact QAI on **(07) 3844 4200** or **1300 130 582** to make an appointment.

If we cannot help you, we will try to refer you to someone who can.

QAI can also help with:

- ◆ Other mental health matters
- ◆ Guardianship and administration
- ◆ Criminal justice support
- ◆ NDIS appeals.

Queensland Advocacy Incorporated

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TREATMENT AUTHORITIES

A factsheet about involuntary treatment for mental illness in Queensland under the *Mental Health Act 2016*

This factsheet has been prepared by Queensland Advocacy Incorporated (QAI), an independent, community-based systems and legal advocacy organisation for people with disability in Queensland (qai.org.au).

This publication is for general information only. It must not be relied on as legal advice.

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