

12/10/11

Joint Select Committee on Australia's Immigration Detention Network

Dear Sir/Madam

I am a psychiatrist employed by the Cairns and Hinterland Mental Health Service, Queensland Health. I work in the Remote Area Mental Health Service, which is based in Cairns and provides psychiatric clinics to communities throughout Cape York and the Torres Strait. I am thus responsible for the psychiatric care of patients admitted to Weipa Hospital from the Scherger Immigration Detention Centre.

Weipa Hospital has one permanent medical officer and two locum doctors. Psychiatric patients who are admitted to Weipa Hospital from Scherger are assessed by a hospital medical officer, and then seen the staff from the Weipa Community Mental Health Service. This service has a Team Leader and four clinical nurses, and provides a psychiatric service to Indigenous communities in the northern, central and western Cape York (Kowanyama, Pormpuraaw, Aurukun, Coen, Lockhart River, Mapoon, Napranum). Mental Health staff are often away at these communities, leaving Weipa Hospital without access to a mental health clinician.

A psychiatric registrar visits Weipa from Cairns for about three days every six weeks. In most instances when a Scherger patient is admitted to Weipa Hospital there is no psychiatrist or psychiatric registrar at Weipa to perform a face to face assessment. If a patient from Scherger is admitted to Weipa Hospital, a Mental Health nurse or hospital Medical Officer discusses their assessment of the patient via telephone with the psychiatric registrar. After further discussion with me, a decision is made about patient management.

Since Scherger was opened in October 2010 there have been 15 psychiatric admissions from the facility to Weipa hospital, five of whom were subsequently transferred to Cairns Base Hospital. Twelve of the admissions to Weipa Hospital have occurred in the last four months, indicating an increasing rate of severe psychiatric symptoms in Scherger detainees. The majority of patients were depressed and suicidal and over half had made some form of self harm attempt. In the majority of cases the major precipitating stress was being in detention for longer than 15 months, and the distress and hopelessness caused by not knowing their fate.

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In view of the facts outlined above, it is my opinion that the psychiatric care of Scherger patients is highly unsatisfactory. The remote location of the Scherger facility means it is usually not possible to have a psychiatrist or psychiatric registrar on site to assess patients. A videoconference assessment or a relayed assessment from a Medical Officer or Mental Health Nurse is far from ideal for these complex cases. Transfer of the patients from Weipa to Cairns is difficult, and at times not desirable for patient management.

As prolonged detention is the major precipitating stress for psychiatric admission, staff and patients see our interventions as hopeless and futile as eventually patients are always returned to Scherger for further detention. A return to detention is a return to an elevated risk of suicide.

It is my opinion that the process of prolonged detention is abusive. The ends cannot justify the means when it involves the knowing abuse of innocent people.

On 11/10/11 Premier Anna Bligh announced an independent Mental Health Commission. In describing the role of this new body, Ms Bligh stated that, *“It will engage continuously with consumers, families, service providers and other stakeholders, ensuring that consumers’ needs and human rights remain paramount at all times and that services remain accessible and well coordinated”*. The contrast between this goal and the actual care of psychiatric patients from Scherger is immense.

Yours sincerely

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