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**Western Australian Association
for Mental Health**

8 October 2020

MEDIA RELEASE

2020 State Budget Analysis: Mental Health

The Western Australian Association for Mental Health

What we saw:

- Spending on Prevention remained low at just 1.7% of mental health spending mix at \$17.2m.
- Spending on Community Support stagnated at 5% of the mix at \$54m.
- \$25m for 16 bed youth mental health, AOD and homelessness service (already announced).
- \$24.5m for 20 bed community care unit (already announced).
- No funding for the implementation plan of the Young People's Priority Framework.
- There is new funding for a new WA Suicide Prevention Action Plan \$46.9m (\$10m already announced for the Aboriginal Suicide regional plans).
- An extra \$68.9m to meet demand for mental health hospital services in the public health system.
- \$24.4m for Fremantle Hospital (already announced).
- No funding to address demand for forensic mental health capacity, instead only 'recommencing the planning work required to support expansion'.
- \$39.4m for the Fair Work Acquisition Equal Remuneration Order on non-government organisations for the mental health sector.
- New funding of \$930,000 for a Midland Intervention Centre.

What it's costing us

- It now costs \$1595 per day for someone to be admitted into a mental health inpatient unit.
- It is far cheaper to invest in the community support sector at \$128 per hour of support for a person reaching out for help.
- Readmission rate is now 16.5% which is higher than the national average of 14.9%.

Media statement

The McGowan Government has failed to address any alternative streams other than hospital and high intensity beds for people seeking care for their mental health challenges in today's State Budget.

Young people and their families have been disappointed by the McGowan Government with no funding allocated for the Young People's Priority Framework, which is expected to be completed by the end of the year.

Despite admitting an increase in distress of mental health challenges, the McGowan Government has continued old world thinking of funnelling more funding into hospital and high intensity beds without matching funding in mental health prevention and community support.



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Actual spending on community supports, that keep people well before and after hospital treatment was budgeted to increase by just \$2.5m to \$54m. However, this is still only 5.3% of the mix of community support spending, a far cry from the 22% as outlined in the Ten-Year Plan to balance WA's mental health system.

It was a similar story for prevention spending, with a budgeted increase of just \$1.8m, resulting in just 1.7% of the mental health budget on prevention.

There was funding allocated for the WA Suicide Prevention Action Plan 2021-25 of \$37m which is welcomed as part of the Government's WA Recovery Plan.

In order to meet the demand of people presenting to hospitals, the Government allocated \$68.9m, an indication that the Government is failing to provide alternatives for people before they hit crisis and require hospital treatment.

WA Association for Mental Health Chief Executive Officer Taryn Harvey said the Governments addiction to hospital spending is creating more demand at the crisis end.

"You can build all the brick and mortar hospitals and hospital beds you like. But these acute services do not help people to stay well at home and in the community, where they feel safe and supported," she said.

"Our hospital system is getting clogged because people can't be discharged and other people can't be admitted.

"People are forced to present to EDs because they have nowhere else to go and as this Budget doubles down on the old world thinking that we must spend more on the crisis end without also providing alternatives for people in the community.

"We are concerned about the looming unemployment and underemployment issue, which will hit people hard. Without a job and the ability to pay rent and mortgages, mental health distress is certain to increase."

Community based supports keep people well for less, reduce the strain on our hospital systems, and support people with mental health challenges when they reach out for help.

Hospital emergency departments saw a decrease of presentations for mental health during COVID-19 as people were concerned about disease transmission and encouraged to stay away from hospitals. Meanwhile mental health distress increased, and our community support sector carried the load.

"Our mental health system is not ready to assist people to stay away from hospitals to ensure it deals with the health impacts of another pandemic crisis," Ms Harvey said.

The \$39.9m allocated for the Equal Remuneration order is welcomed by the non-government mental health sector and will go a long way in valuing workers in the community mental health sector.

Prevention

Stats

- Spending on Prevention remained below 2% of the mental health spend at just 1.7% as outlined as the 2020 milestone in the 10-year plan, Western Australian Mental Health, Alcohol and Other Drug Services Plan 2015–2025 (The Ten-Year Plan).



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- Since 2014/15 there has been a \$7million cut in mental health prevention spending from \$21m to \$13m in 2019/20 (Budget estimate).
- This is a further move away from the agreed target of 5% of spending on prevention, now at 1.4% of the mental health budget.

More investment in prevention is needed to ensure the best mental health outcomes for WA communities. Evidence-based prevention initiatives can generate significant return on investment, support people to stay well in the community, and reduce the long-term impacts of mental health challenges.

There are consistent calls for increasing investment in mental health prevention approaches nationally and internationally, and the Ten-Year Plan explicitly states the need for increased investment in this area. The imperative for prevention investment has again come to the fore in the context of COVID-19 and is a key State Priority for mental health and AOD initiatives in WA.

Community Support

- Spending on Community Support funding from 5% to 10% in order to progress towards achieving the target of the Ten-Year plan of 22% by 2025.
- Since 2014/15 spending on Community Support for mental health and AOD has stagnated, with a miniscule increase of just \$400,000 from \$50.33m to \$50.72m in the past five years.
- This is less than a 1% increase in spending on community support.
- The Liberal Government cut community support funding by \$6m from \$52m in 2014/15 down to \$46m in 2016/17
- Labor has not restored that record funding, only increasing it back up to \$50m in 2019/20.
- This needs a five-fold increase to \$250m per year to meet demand.
- There is still \$1.3 million short of previous funding levels back in 2015-16 when the Plan commenced.

Hospital presentations

- On September 22, The Minister for Mental Health Roger Cook told Parliament that on 18 September 2020, 147 metropolitan hospital attendances related to mental health. That was a 22 per cent increase in the number for the same time last year.
- 178 people were stuck in a mental health inpatient bed in 2019 when there was no clinical need to be there, due to a lack of community mental health supports, accommodation options and community-based treatment options. Increased investment in community supports is vital.

Readmission rates

WA has historically had the highest rate of readmission to hospital within 28 days of discharge for mental health of all states and territories. The latest data shows a readmission rate of 18.6% compared to the national average of 14.9% (OCP, 2020).

Our mental health system is not working to keep people out of hospital in the community, and a lack of investment in community-based supports means that people cannot access supports close to home and in their community, and have no option but to return to hospital in times of need.



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