

### Caseflow

In the 2018-19 year to date the Tribunal has listed 9,165 patient hearings and conducted 4,429 patient hearings. This represents an 11% increase in listings and an 8% increase in hearings compared with the same period in 2017-18. The majority of matters which are listed but do not proceed to hearing are either cancelled because the patient's Order has been revoked or are rescheduled to facilitate the attendance of parties and support persons.

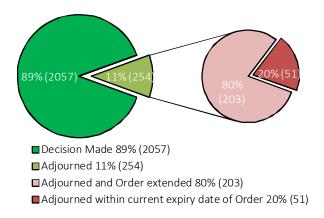
#### Matters determined as a percentage of all matters heard

In the October to December 2018 period, 89% of hearing requests (2,057) were determined and 254 (11%) were adjourned. The number of pending matters remained steady at less than 1% of the total caseload.

In this quarter, six variation hearings were conducted more than 28 days after the variation of the Order. In all of these cases, the Tribunal had adjourned the hearing beyond the 28-day limit. It did so knowing that the hearing would occur outside the statutory timeline but for the reason that proceeding with the hearing on the day would have been unfair to the patient. Additionally, there were two matters where a hearing was not conducted before a patient's Order expired. In each instance, the Tribunal found that the substantive Order had expired and therefore it did not have jurisdiction to conduct a hearing. Each of these maters had been listed out of time due to Tribunal error.

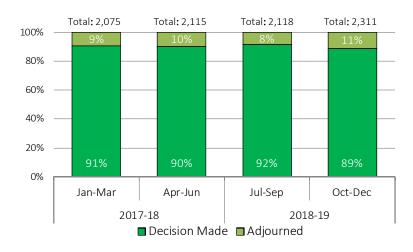
#### Proportion of matters adjourned

The number of adjournments as a proportion of matters determined has increased in the last quarter. 80% (203) of adjourned matters extended the Order. The primary reason for the Tribunal granting an adjournment with extension was in relation to procedural fairness (including allowing time to enable participation of the patient).

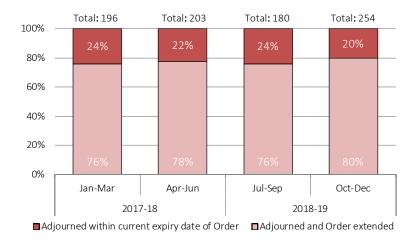




#### Comparison of matters determined and adjourned between quarters



### Comparison of matters adjourned with and without Order being extended





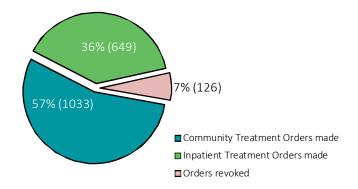
### **Tribunal Orders**

#### Treatment Order determinations made by the Tribunal

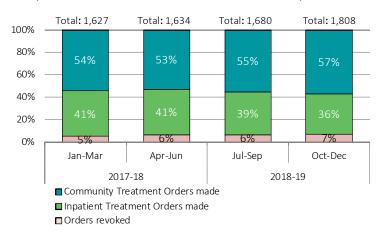
When the Tribunal makes a Treatment Order, the Tribunal must determine the category of the Order (Community Treatment Order or Inpatient Treatment Order) based on the circumstances at the time of the hearing.

The patient's treating team is required to regularly review the category of the Order and whether the criteria for compulsory treatment apply to the patient. They must vary an Inpatient Treatment Order to a Community Treatment Order if satisfied that treatment can occur in the community or revoke the Order if the treatment criteria no longer apply. Conversely, if a person on a Community Treatment Order can no longer be treated in the community their Order can be varied to an Inpatient Treatment Order.

Between October and December 2018, the Tribunal made 1,033 Community Treatment Orders, 649 Inpatient Treatment Orders and revoked 126 Temporary Treatment Orders / Treatment Orders.



#### Comparison of Tribunal determinations between quarters

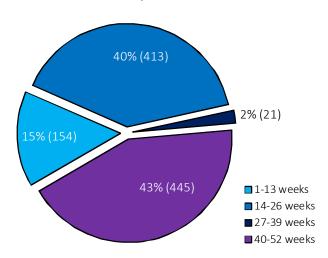




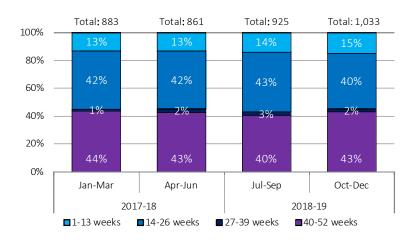
#### **Duration of Orders made**

When the Tribunal makes an Order, the Tribunal must also set the duration of the Order.

### **Duration of Community Treatment Orders**

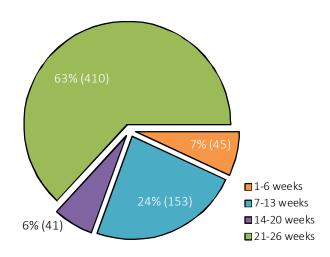


### Comparison of Community Treatment Order duration between quarters

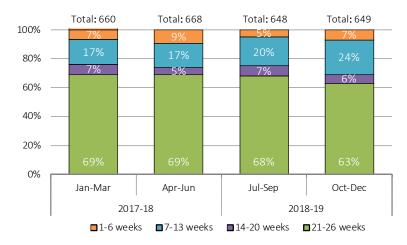




### **Duration of Inpatient Treatment Orders**



### Comparison of Inpatient Treatment Order duration between quarters



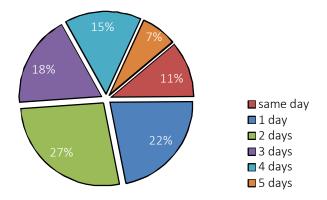


### ECT Orders<sup>1</sup>

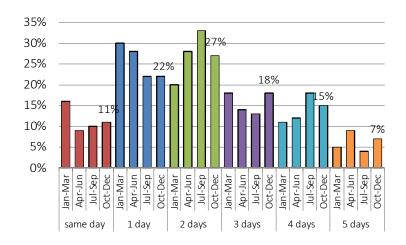
#### Elapsed time from receipt of ECT application to hearing

The Tribunal must list and complete the hearing of an application for ECT as soon as practicable and within five business days after receiving the application. The Tribunal Registry aims to list and hear matters within the timeframe requested by the service, and liaises with services when listing hearings to ensure patients receive procedural fairness.

In the October to December 2018 quarter, 33% of ECT applications were listed for hearing on the same day or within one day of the application being received.



#### Comparison of elapsed time from receipt of ECT application to hearing between quarters



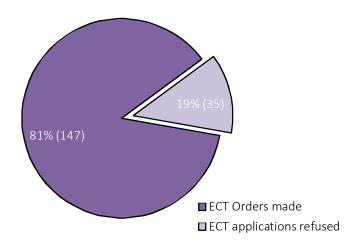
<sup>&</sup>lt;sup>1</sup> Amendments made by the *Medical Treatment Planning and Decisions Act 2016* (Vic) that came into effect on 12 March 2018 expanded the Tribunal's jurisdiction to make ECT Orders to include, in some instances, adult, voluntary patients who lack capacity. Consistent with our previous practice our KPI reports will report on ECT Orders globally. Our annual report will provide a detailed breakdown of ECT Orders, including whether the person for whom ECT was being proposed was a compulsory adult patient, voluntary adult, or a young person under 18 years of age.

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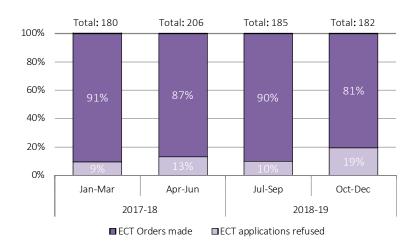


### ECT Orders made and applications refused by the Tribunal

Between October and December 2018, the Tribunal heard 182 applications for ECT Orders. Of those, 147 (81%) ECT Orders were made and 35 (19%) ECT applications were refused.



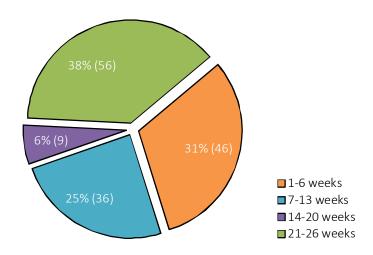
#### Comparison of Tribunal ECT determinations between quarters



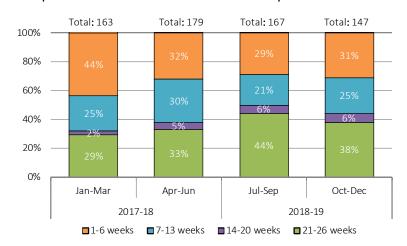


#### **Duration of ECT Orders**

When making an ECT Order, the Tribunal must set the duration of the Order and the maximum number of ECT treatments that can be administered under the Order.

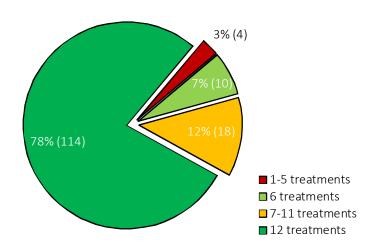


#### Comparison of ECT Order duration between quarters

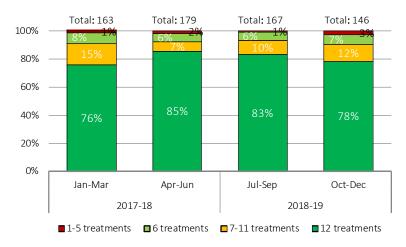




### Number of treatments authorised through ECT Orders



### Comparison of treatments authorised through ECT Orders between quarters

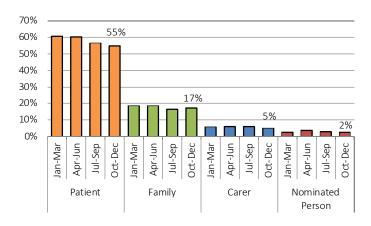




### Attendance at hearings and feedback received by the Tribunal

#### Attendance

#### Comparison of attendance by patients and those who support them



#### **Feedback**

During the quarter the Tribunal received three complaints. The complaints related to the conduct of hearings and were handled and finalised in accordance with the Tribunal's feedback and complaints process which is available on the Tribunal's website.