



# **Mental Health Tribunal Quarterly Activity Report**

**1 October to 31 December 2025**

# Mental Health Tribunal

## Quarterly Activity Report

1 October to 31 December 2025

## **Mental Health Tribunal**

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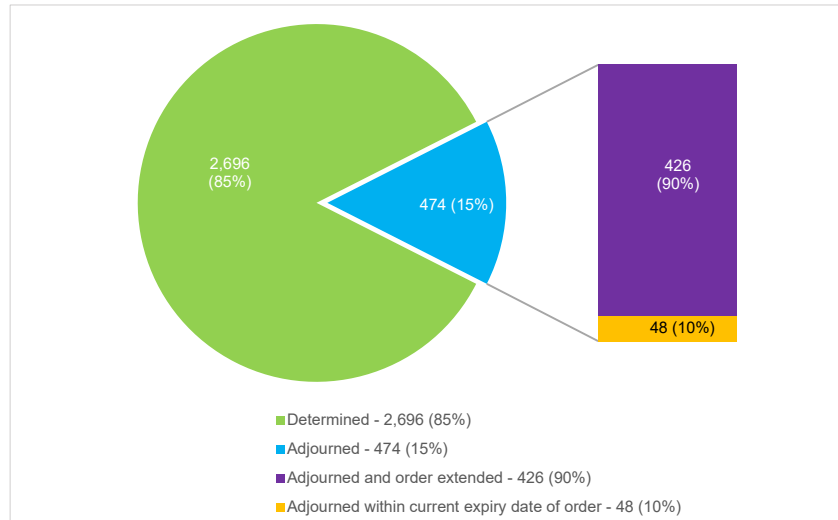
## *Notes about the Mental Health Tribunal Quarterly Activity Report:*

To enable the community to be informed of the practical operation of the *Mental Health and Wellbeing Act 2022*, the Mental Health Tribunal ('the Tribunal') is committed to providing regular and detailed information about the decisions it makes concerning compulsory mental health treatment. Quarterly Activity Reports are produced for the first three quarters of each financial year and the Annual Report captures the full financial year.

# 1. Tribunal hearings

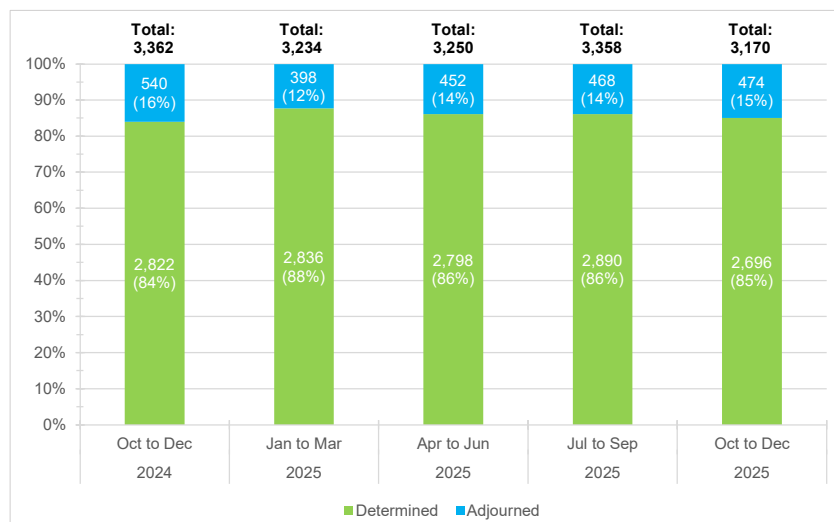
Between 1 October and 31 December 2025, the Tribunal conducted 3,170 hearings. There were a further 2,563 matters which were listed for a hearing but were cancelled before the hearing date, usually as a result of the patient's order being revoked (cancelled) or the hearing being rescheduled to another date.

Of the 3,170 hearings conducted in this period, 85% (2,696) were determined and 15% (474) were adjourned.



## 1.1 Hearings conducted

Hearings conducted is the combined total of treatment order hearings, ECT applications and all other hearing types.



## 1.2 Ongoing impact of high demand for hearings

It is still the case that demand for hearings exceeds the Tribunal's capacity and we are continuing to list hearings in accordance with the prioritisation schedule that is [published on our website](#). In summary, the Tribunal is managing to list all hearings except patient applications for revocation for which there are significant delays. At the end of December 2025, 149 patient applications were waiting to be listed, the average wait time was 9 weeks, but the longest wait time was 12 weeks. The Tribunal acknowledges and deeply regrets the impact of these delays. An appointment round for new psychiatrist and registered medical members is underway and when new members are appointed our hearing capacity will be greatly enhanced.

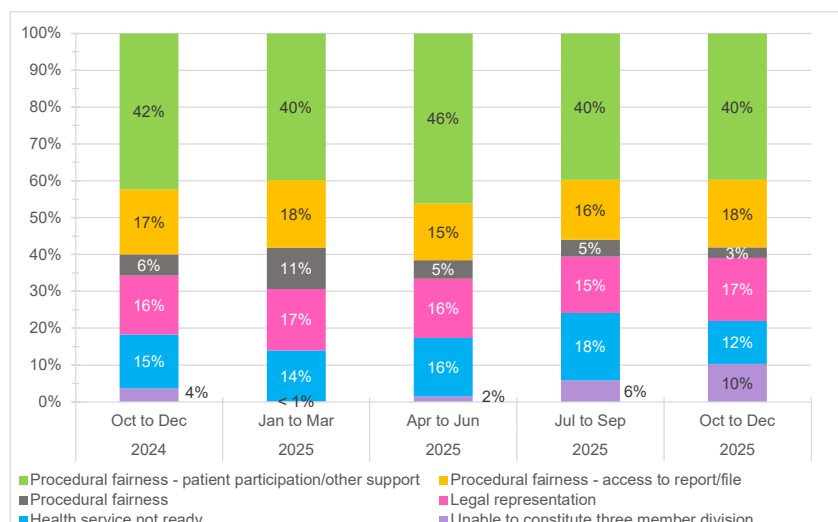
## 1.3 Hearings adjourned

Hearings can be adjourned to a later date with or without the patient's order being extended. If an adjournment does include an extension of an order the maximum length of the extension allowed under the Act is 10 business days and it can only be extended once. This quarter the proportion of hearings adjourned with an order extension was 90%.



## 1.4 Reasons for adjournments with extension of order

A patient's hearing can be adjourned and their temporary treatment order or treatment order extended by a maximum of 10 business days if the Tribunal is satisfied that exceptional circumstances exist.

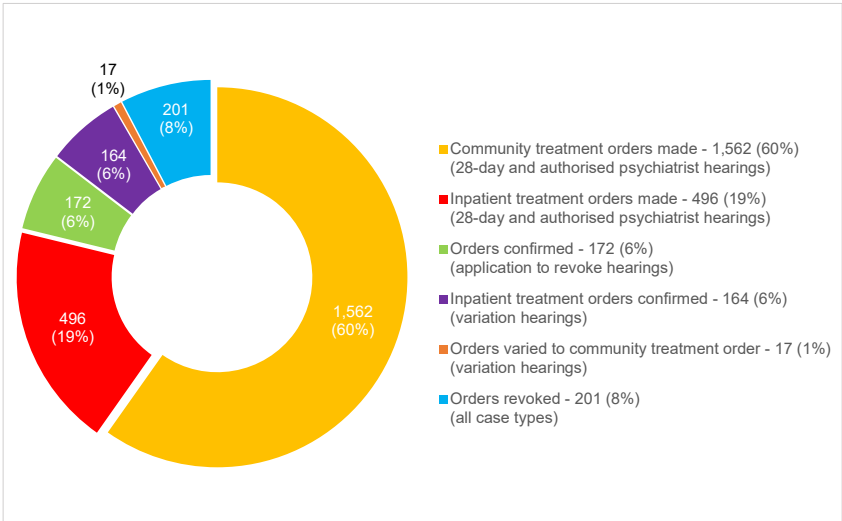


## 2. Treatment order hearings

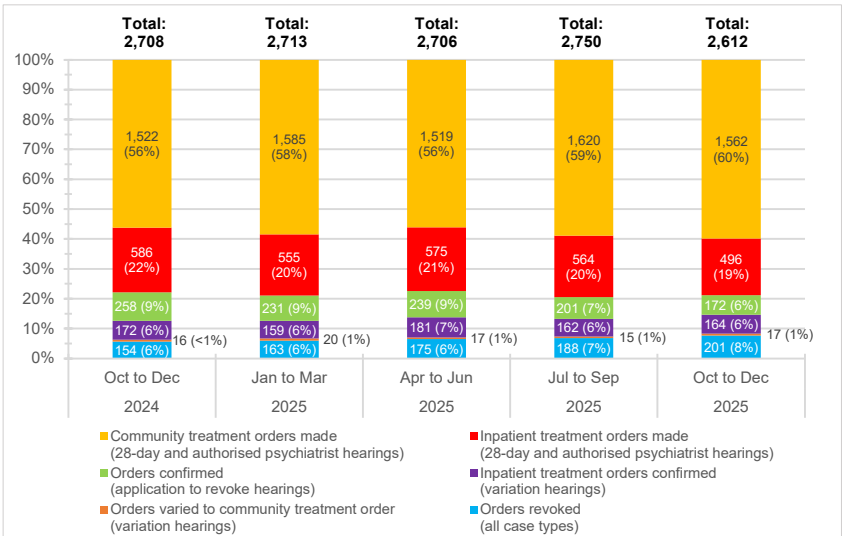
### 2.1 Treatment orders made, confirmed or revoked by the Tribunal

In any hearing concerning a temporary treatment order or treatment order, the Tribunal must decide whether to make, confirm or revoke an order. When the Tribunal makes or confirms an order, the Tribunal must determine the category of the order, being a community treatment order or an inpatient treatment order, based on the circumstances at the time of the hearing. If the Tribunal is *making* a treatment order it also determines the duration of a treatment order. If the Tribunal is *confirming* a treatment order, the expiry date of that order remains the same and cannot be changed by the Tribunal.

#### 2.1.1 Outcome of treatment order hearings (all case types, October to December 2025)



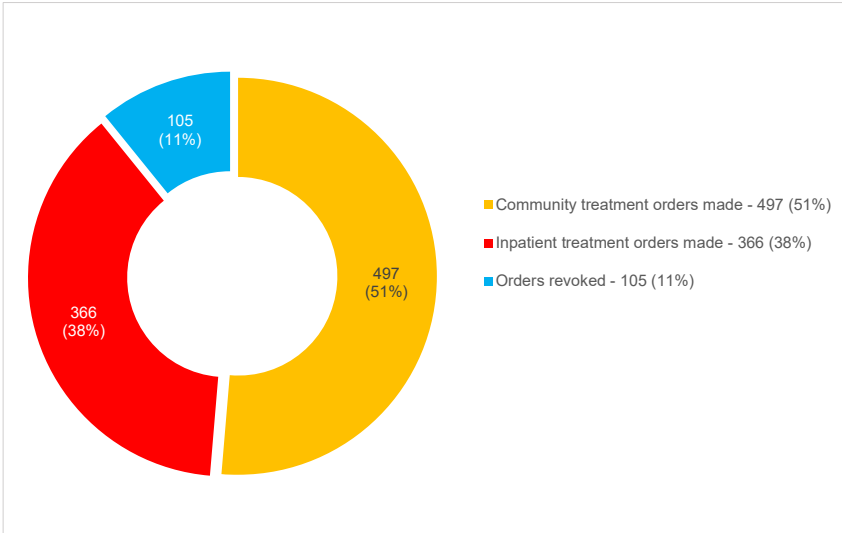
#### 2.1.2 Quarterly comparison of treatment order hearing outcomes (all case types)



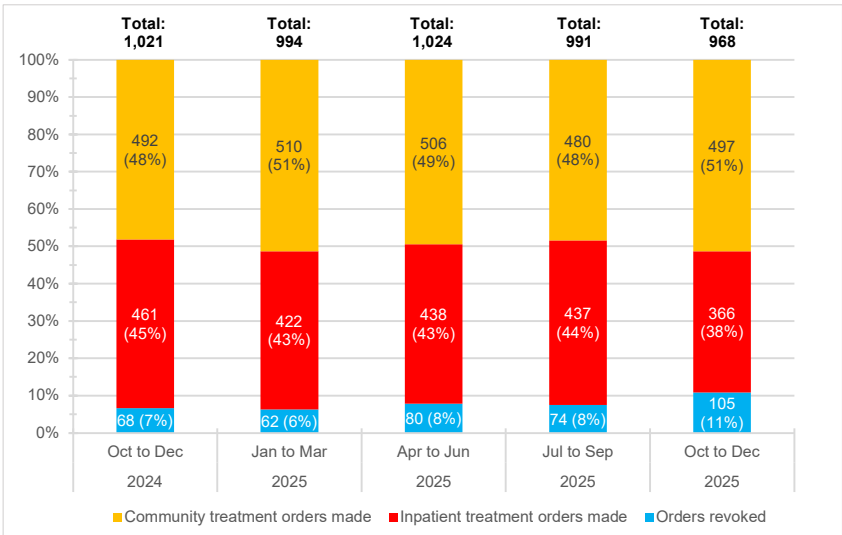
2.2 28-day hearings

The Tribunal must conduct a hearing to determine whether to make a treatment order for a person who is subject to a temporary treatment order within 28 days of a patient being placed on a temporary treatment order. After conducting the hearing, the Tribunal must either make a treatment order or revoke the temporary treatment order. If making a treatment order, the Tribunal must also decide whether it is an inpatient or community treatment order and the duration of the treatment order.

2.2.1 Treatment orders made and revoked (October to December 2025)

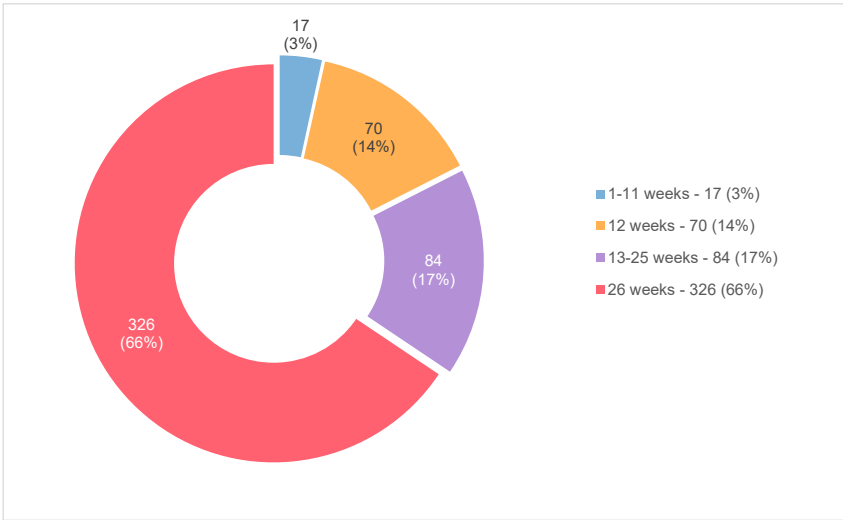


2.2.2 Quarterly comparison of treatment orders made and revoked

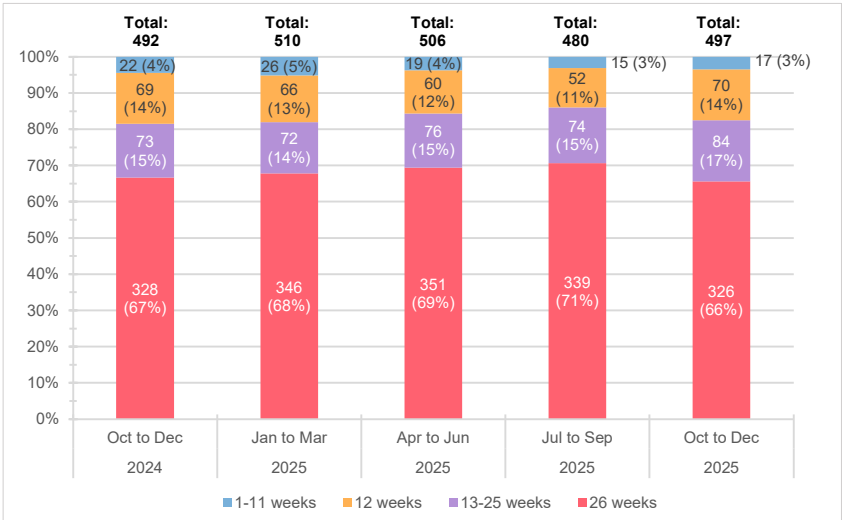




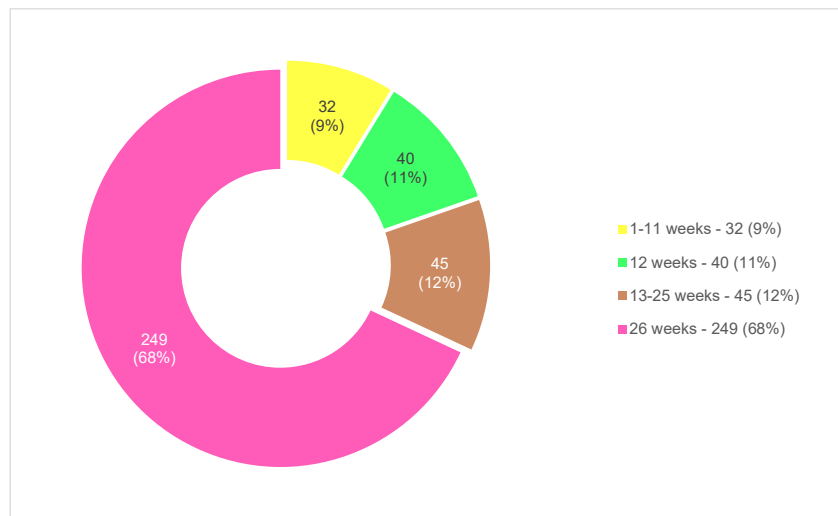
2.2.3 Duration of community treatment orders made (October to December 2025)



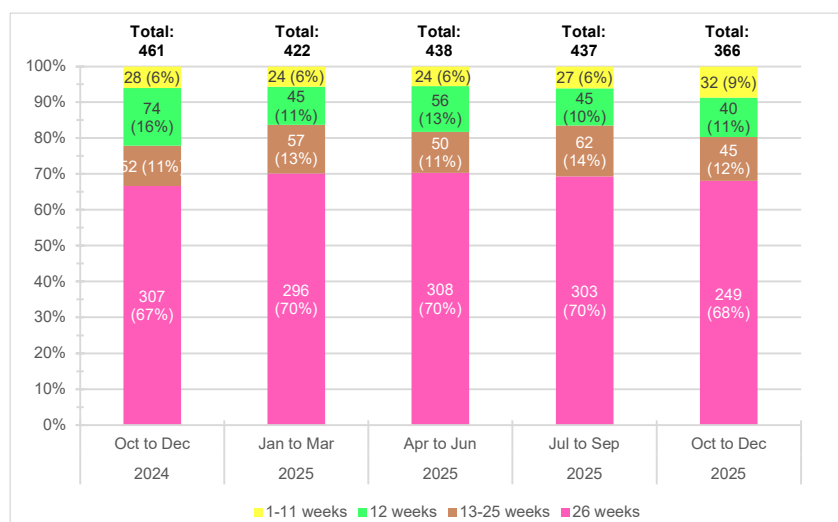
2.2.4 Quarterly comparison of the duration of community treatment orders



## 2.2.5 Duration of inpatient treatment orders made (October to December 2025)



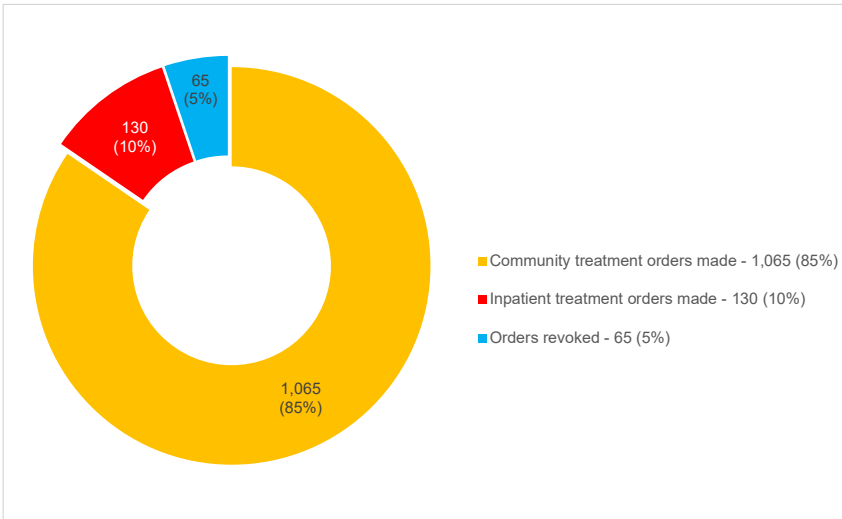
## 2.2.6 Quarterly comparison of the duration of inpatient treatment orders



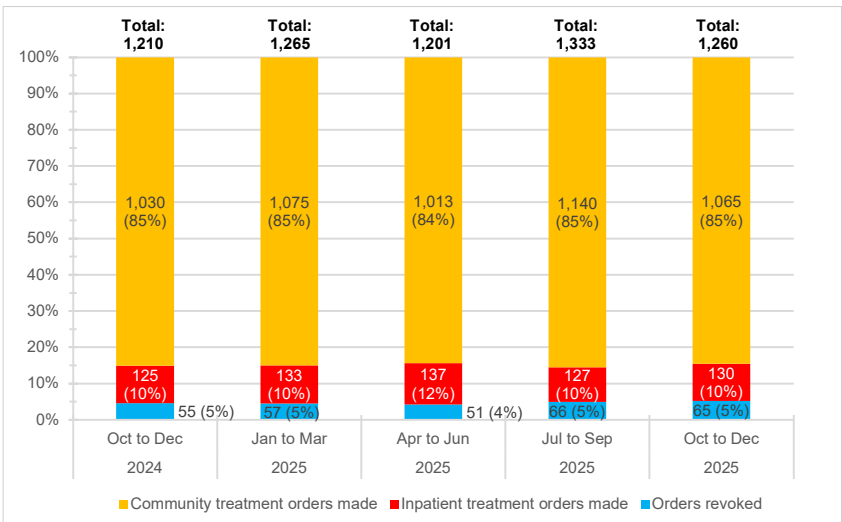
2.3 Authorised psychiatrist application hearings

An authorised psychiatrist can apply to the Tribunal for a further treatment order in relation to a compulsory patient who is currently subject to a treatment order. After conducting the hearing, the Tribunal must either make a new treatment order or revoke the current treatment order. If making a treatment order, the Tribunal must also decide whether it is an inpatient or community treatment order and the duration of the treatment order.

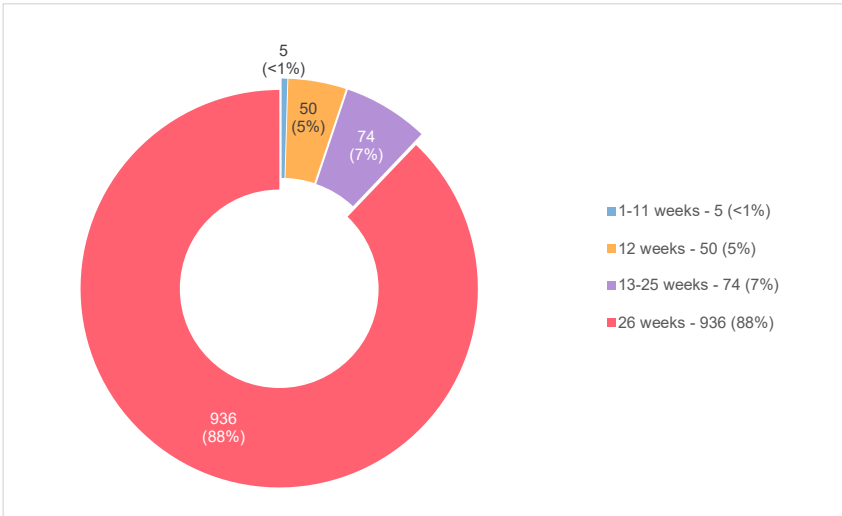
2.3.1 Treatment orders made and revoked (October to December 2025)



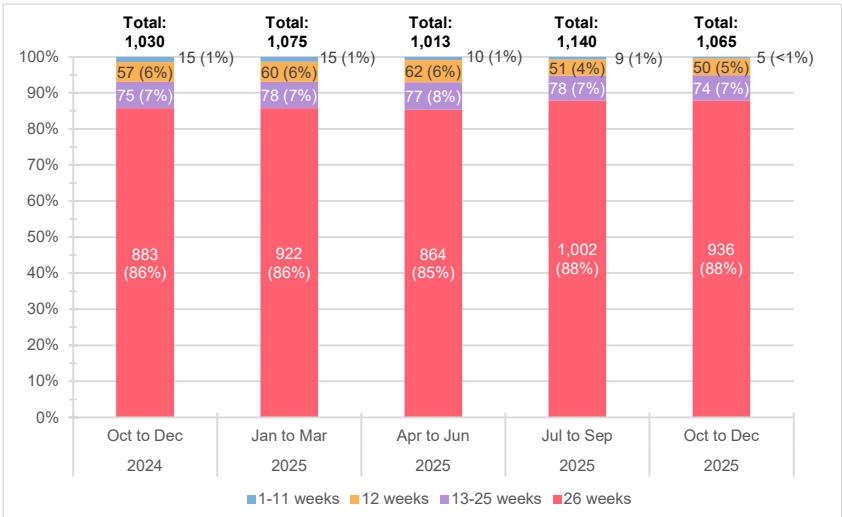
2.3.2 Quarterly comparison of treatment orders made and revoked



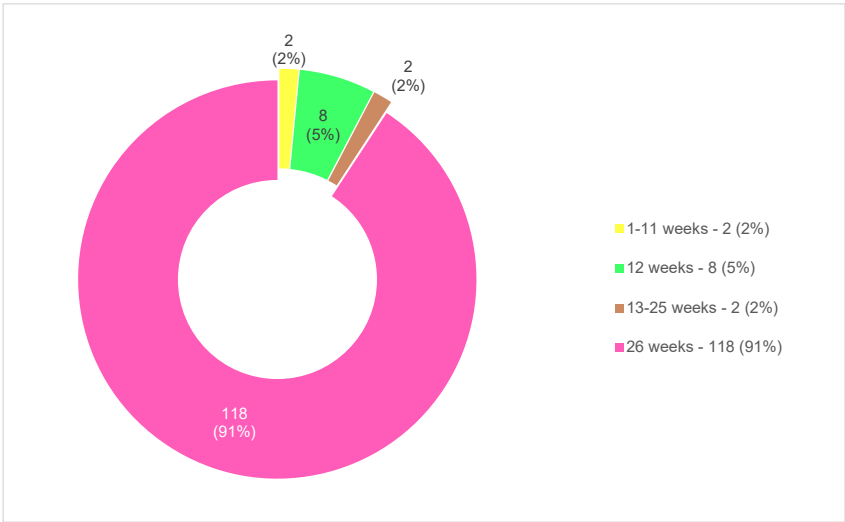
2.3.3 Duration of community treatment orders made (October to December 2025)



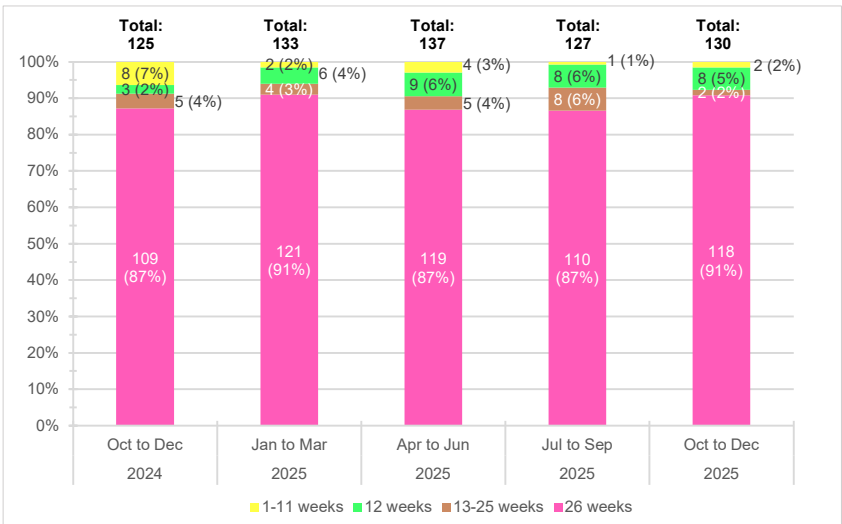
2.3.4 Quarterly comparison of the duration of community treatment orders



2.3.5 Duration of inpatient treatment orders made (October to December 2025)



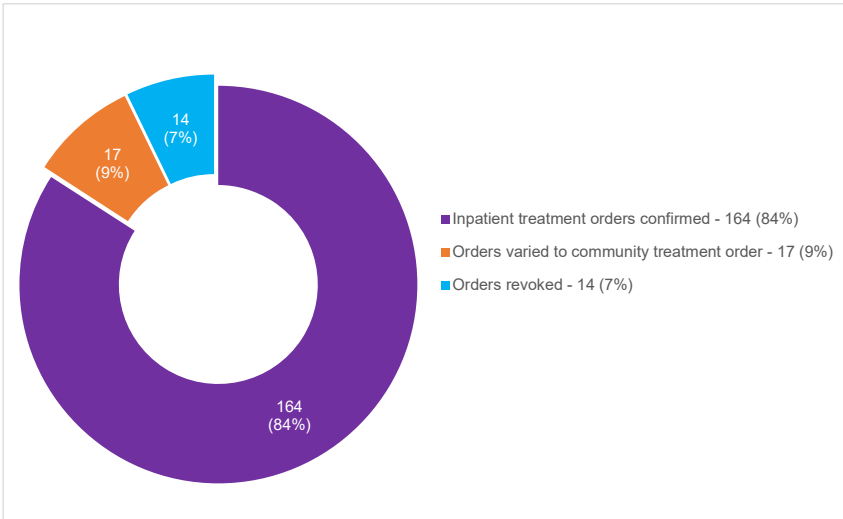
2.3.6 Quarterly comparison of the duration of inpatient treatment orders



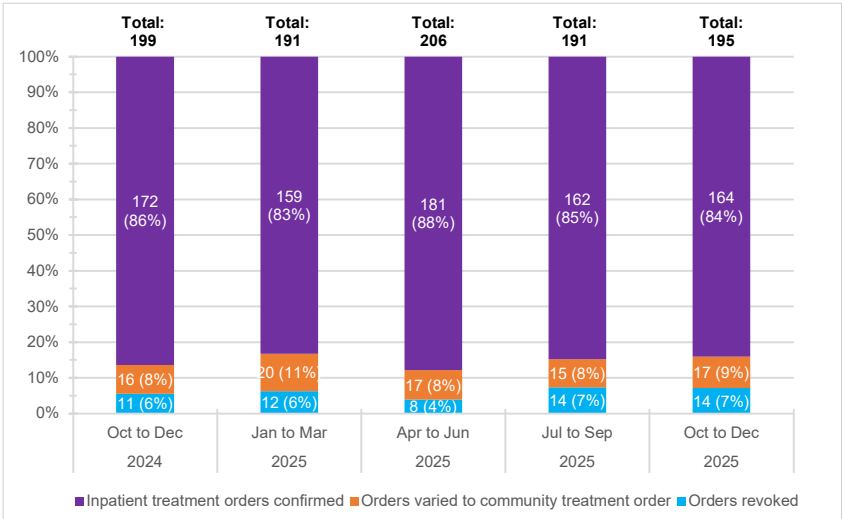
2.4 Patients whose community treatment order was varied to an inpatient treatment order

The Tribunal must initiate a variation hearing when an authorised psychiatrist varies a community treatment order to an inpatient treatment order. The hearing must occur within 28 days of the variation, and the Tribunal must determine whether to confirm or revoke the treatment order. If confirming the treatment order, the Tribunal determines whether it should be for inpatient or community treatment but does not decide on a new duration.

2.4.1 Treatment orders confirmed and revoked (October to December 2025)



2.4.2 Quarterly comparison of treatment orders confirmed and revoked

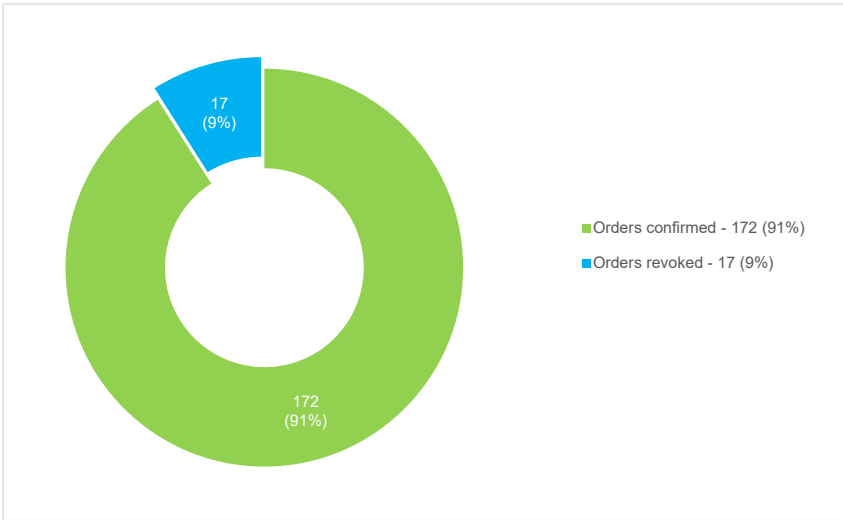


2.5 Applications for revocation by the patient

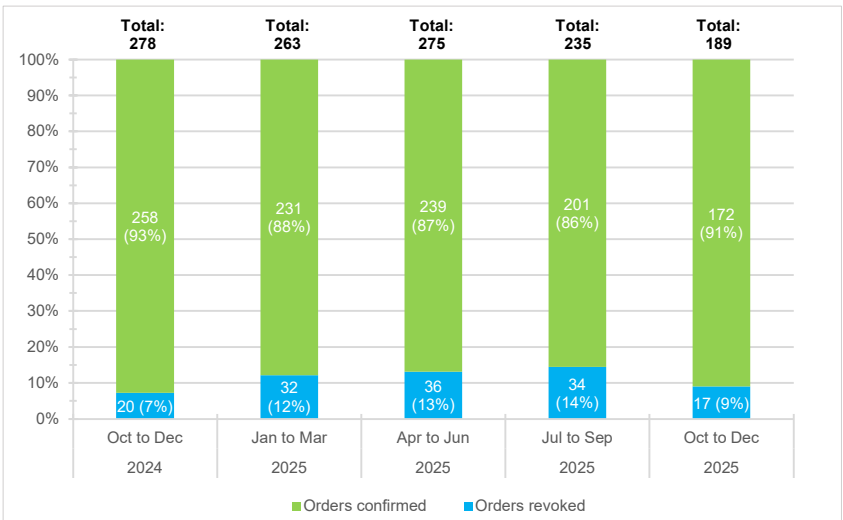
A patient subject to a temporary treatment order or treatment order, or someone on their behalf, can apply to the Tribunal at any time to revoke the order. After conducting the hearing, the Tribunal must either confirm the order or revoke the treatment order or temporary treatment order. If the patient’s application concerns a treatment order and the Tribunal decides to confirm the treatment order, it must also decide whether it is for inpatient or community treatment but does not decide on a new duration.

Please refer to section 1.3 of this report which outlines the impact of current capacity constraints on the listing of patient applications for revocation.

2.5.1 Treatment orders confirmed and revoked (October to December 2025)



2.5.2 Quarterly comparison of treatment orders confirmed and revoked

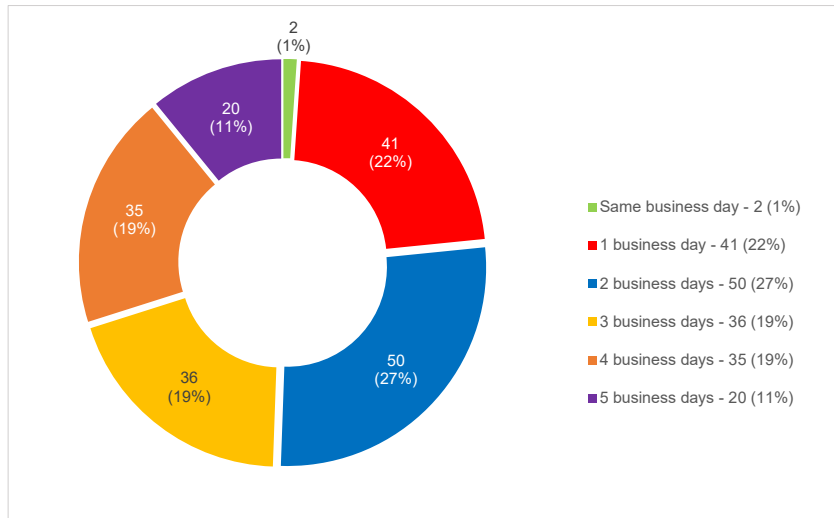


### 3. ECT orders

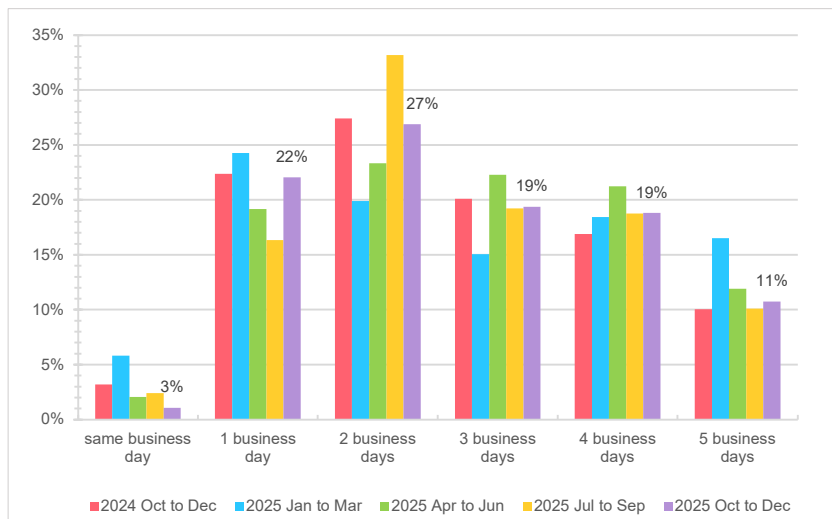
#### 3.1 Elapsed time from receipt of ECT application to hearing

The Tribunal must list and complete the hearing of an application for an ECT order as soon as practicable and within five business days after receiving the application. The Tribunal Registry seeks to balance considerations of clinical urgency alongside procedural fairness and allowing people reasonable time to prepare for a hearing.

##### 3.1.1 Elapsed time from receipt of application to hearing (October to December 2025)



##### 3.1.2 Quarterly comparison of elapsed time from receipt of application to hearing

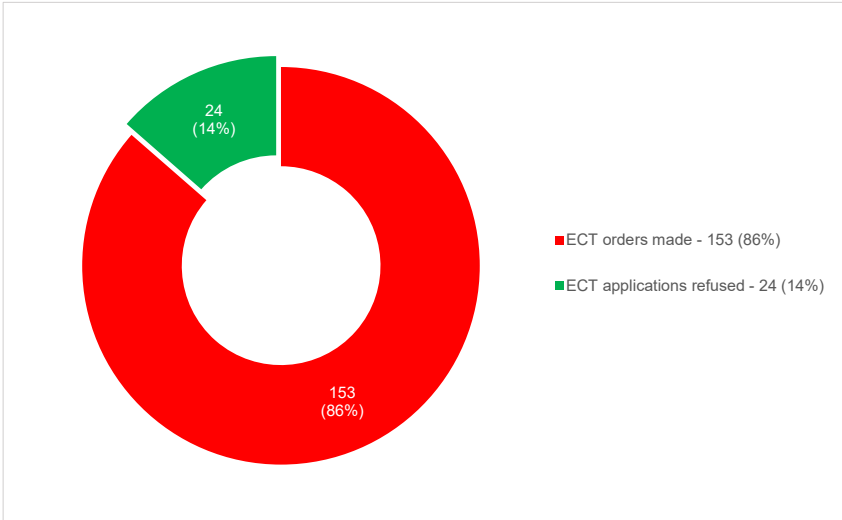




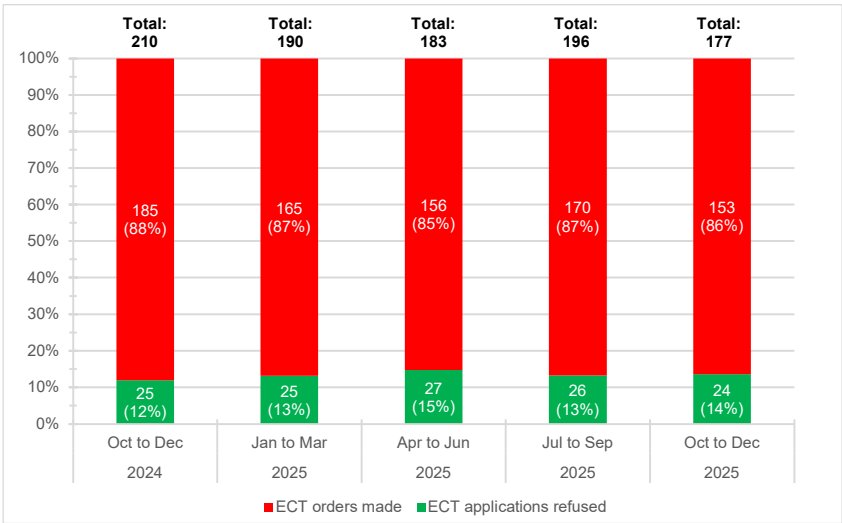
3.2 Outcomes of applications for an ECT order

The Tribunal heard 177 applications for ECT orders between October and December 2025. Of those, 153 (86%) applications were granted and ECT orders were made, and 24 (14%) applications were refused.

3.2.1 ECT orders made and applications refused (October to December 2025)



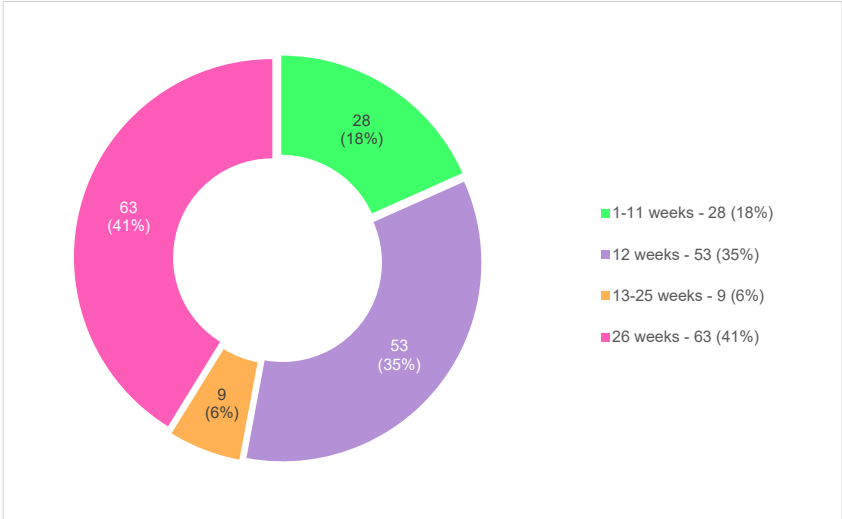
3.2.2 Quarterly comparison of ECT orders made and applications refused



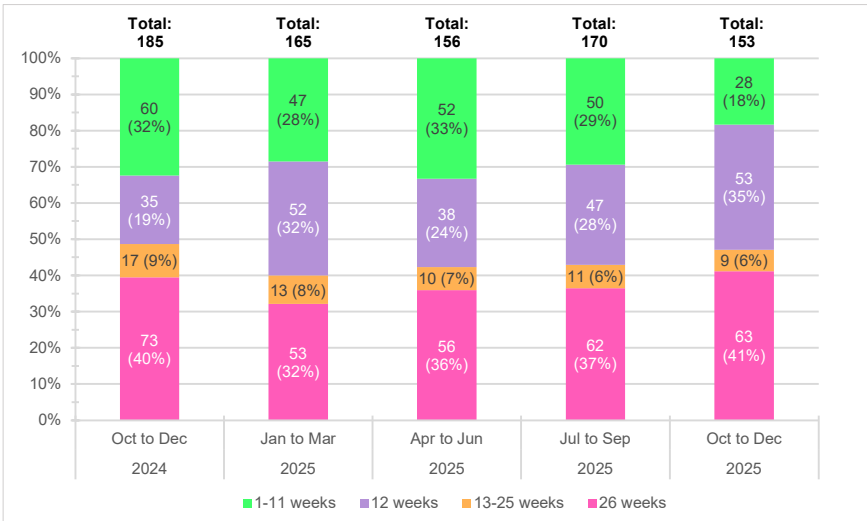
3.3 Duration of ECT orders made

When making an ECT order, the Tribunal must set the duration of the order up to a maximum of six months (26 weeks).

3.3.1 Duration of ECT orders made (October to December 2025)



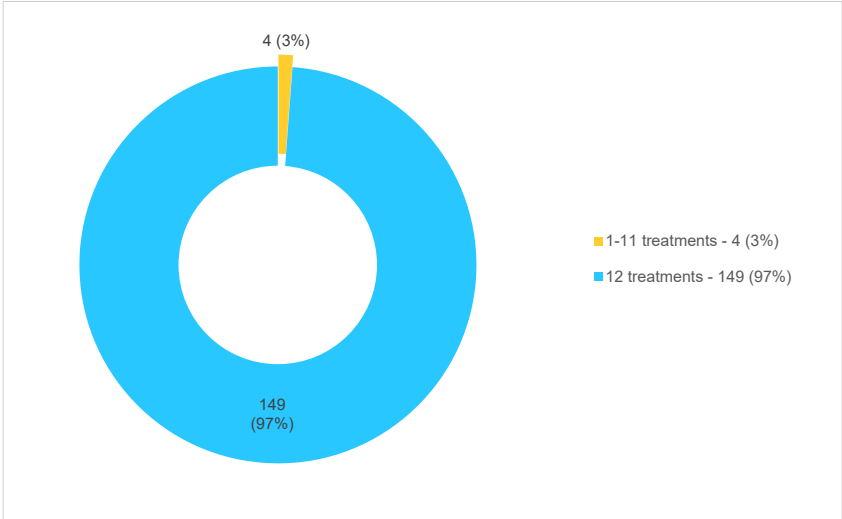
3.3.2 Quarterly comparison of the duration of ECT orders



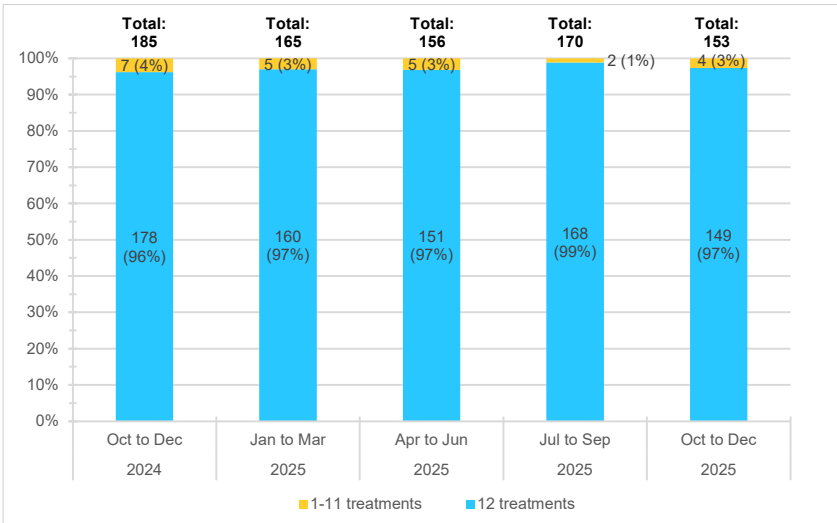
3.4 Number of ECT treatments authorised

When making an ECT order, the Tribunal must authorise the number of treatments that can be administered, up to a maximum of 12.

3.4.1 Number of treatments authorised by ECT orders (October to December 2025)

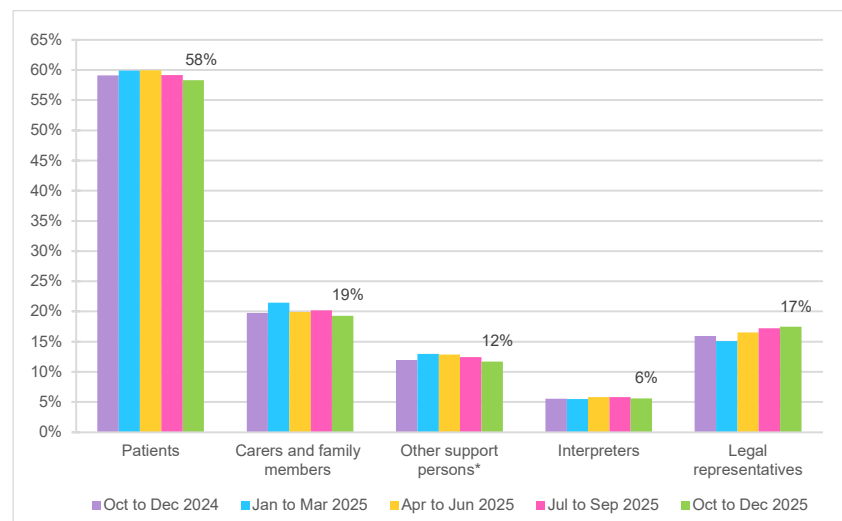


3.4.2 Quarterly comparison of the number of treatments authorised by ECT orders



## 4. Participation at hearings

The Tribunal is committed to promoting and encouraging the participation of patients and the people who support them in hearings. The Tribunal seeks to maximise the notice period to allow people to participate.



\* "Other support persons" includes nominated support persons, guardians, medical treatment decision makers, support workers and friends.

## 5. Number of patients and hearings per patient

In early 2025, the Tribunal analysed hearing data differently to understand the number of individuals having a Tribunal hearing, how frequently they have a hearing, and the combined reasons for hearings. This was in the context of trying to identify the different factors that may be contributing to increased hearing demand. Figures in our second quarter report (ending in December) are reported by calendar year to enable a comparison of data over a 12-month period. Our Annual Report provides a comparison of financial year figures.

### 5.1 Total number of patients and hearings

	1 January to 31 December 2024	1 January to 31 December 2025
Number of hearings conducted*	12,734	12,111
Number of patients	6,345	5,908
% change in hearings from previous year	+5%	-
% change in patients from previous year	+7%	-
Average number of hearings per patient	2.0	2.0

\* The count of hearings excludes applications to deny access to documents.

## 5.2 Number of hearings conducted for each patient

	1 January to 31 December 2025			1 January to 31 December 2024		
	No. of patients	% of patients	% of hearings conducted	No. of patients	% of patients	% of hearings conducted
1 hearing	2,587	41%	20%	2,406	41%	20%
2 hearings	2,211	35%	35%	1,992	34%	33%
3 hearings	916	14%	21%	859	14%	21%
4 hearings	376	6%	12%	364	6%	12%
5+ hearings	255	4%	12%	287	5%	14%
<b>Total*</b>	<b>6,345</b>	<b>100%</b>	<b>100%</b>	<b>5,908</b>	<b>100%</b>	<b>100%</b>

\* The count of hearings excludes applications to deny access to documents.

## 5.3 Number of hearings conducted by case combinations

	1 January to 31 December 2025	1 January to 31 December 2024
	No. of hearings	No. of hearings
28-day hearing	4,332	4,119
28-day hearing and application for revocation	449	534
Application for a further treatment order	5,326	4,882
Application for a further treatment order and application for revocation	162	127
Application for a further treatment order and variation hearing	292	281
Application for a further treatment order, application for revocation and variation hearing	15	15
Application for revocation	618	736
Variation hearing	526	528
Application for revocation and variation hearing	81	69
28-day hearing (security patient)	123	78
28-day hearing and application for revocation (security patient)	0	3
Application for revocation (security patient)	0	1
Application for ECT (adult patient)	717	638
Application for ECT (young patient)	7	4
Application for ECT (adult not a patient)	70	80
Application for ECT (young person not a patient)	2	0
Neurosurgery for Mental Illness	2	5
Application to transfer a patient interstate	1	0
Application to transfer a person interstate	4	1
Application to transfer patient to another service	7	10
<b>Total*^</b>	<b>12,734</b>	<b>12,111</b>

\* This count of hearings excludes applications to deny access to documents.

^ In order to align the count of hearings in Part 1, a hearing of an ECT application has been included as a stand-alone hearing and not combined with a concurrent treatment order matter.

## 6. Complaints & feedback

This quarter the Tribunal received 14 complaints and feedback<sup>^</sup>\* categorised in the table below.

All complaints and feedback have been responded to in accordance with the Tribunal's [Complaints and feedback policy](#) which is available on our website.

	Complaints	Feedback
Clarification of procedures	-	1
Conduct of hearings	6	2
Procedural fairness	-	3
Technical or administrative difficulty or error	2	-
Customer service	-	-

<sup>^</sup> Where multiple contacts are received about one hearing or issue these are counted once. Where a complaint is later withdrawn it is not counted.

\*The number of complaints and feedback may not match the count of complaint or feedback types as each contact can raise multiple issues concerns.