

Legislative Council
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EATING DISORDER UNIT

The Hon. A. BRESSINGTON (14:44): I seek leave to make a brief explanation before asking the minister representing the Minister for Health questions about the current review of eating disorder services in South Australia.

Leave granted.

The Hon. A. BRESSINGTON: Eating disorders have a traumatic impact within our community. Sufferers not only face the physical and mental trauma and the stigma and isolation that inevitably accompany such conditions, but also the very limited resources and services available, which become worse in rural and remote areas.

When the government announced that Ward 4GP would be closed last year the result was a public outcry, as evidenced by the petition submitted by the member for Morphett in the other place, which contains close to 3,000 signatures against the closure. In addition, health professionals who could see the value in maintaining the acute inpatient facility were also vocal in their belief in the necessity of retaining the ward.

In a suspected attempt to silence these professionals, a psychiatrist on Ward 4GP, Dr Randall Long, was threatened with disciplinary action for disseminating anti-closure material. Thankfully, this threat suddenly disappeared after it became public following an *Advertiser* article on 18 March, last month.

In the days prior to a rally organised by advocates, some of whom had suffered an eating disorder, minister Hill obviously buckled to the political pressure and announced the establishment of a statewide review of eating disorder services. It was my suspicion at the time that this review was simply a political cover for the minister and designed to distract those who had been so vocal against the closure.

An email forwarded by an advocate of Ward 4GP to my office confirms this. In it, the Director of Mental Health Operations, Dr Derek Wright, states:

Once we have the outcome of the proposed Model of Care we will be clear about what elements of services will be required into the future. However if inpatient beds are recommended to stay at Flinders we do not see 4GP as being a suitable long term option.

An honourable member interjecting:

The Hon. A. BRESSINGTON: Never have a review unless you know what the outcome is going to be. Despite their attempts to portray to the public that no decision as to the future of Ward 4GP will be made until the report of the review, it is clear from this email that the government has no intention of heeding the calls of the public or the recommendations of the review, and Ward 4GP is to close. This would be why clients and carers have only had limited input into the review, with only one workshop being held to which they were specifically invited and given only five days notice, two of those being a weekend—

The PRESIDENT: The honourable member should get to the question.

The Hon. A. BRESSINGTON: —this is despite minister Hill saying:

There will be full consultation, discussion and involvement with the clinicians and those who represent the users of the service.

My questions are:

1. Does the minister believe that one workshop for clients of eating disorder services and their carers, that they were given such short notice of the workshop and that it was held at a time when many were unable to attend to due to work and university commitments, is appropriate?
2. Does the minister concede that the government has no intention of retaining Ward 4GP, regardless of the so-called community consultation, professional opinions and the fact that the review is yet to report?
3. If this is the case, how does the Minister for Health justify the hope he gave to the 2,937 people who signed the petition when he announced the review of the decision to close Ward 4GP, giving the impression that the ward may be retained?

The Hon. G.E. GAGO (Minister for Regional Development, Minister for Public Sector Management, Minister for the Status of Women, Minister for Consumer Affairs, Minister for Government Enterprises) (14:48): I thank the honourable member for her most important questions and will refer those to the Minister for Health in another place and bring back a response. I would like to say that, indeed, this government is very committed to providing excellent health services to all South Australians in need, but, in particular, to those people with eating disorders.

The Minister for Health has made it very clear that the review of services is not going to result in a reduction of our commitment to provide services to people with eating disorders. It remains highly likely that a range of different types of services are likely to be required to meet the range of different needs for these people.

Eating disorders are very complex disorders and need a complex range of treatments and approaches to manage them. It can also be a very chronic problem as well that needs addressing over very long periods of time. It usually requires a combination of acute services and community-based services to help manage that chronic nature, but education, prevention and early intervention are also important aspects of eating disorders.

I think I have mentioned in this place before that I have visited Ward 4G previously, and it certainly is not an ideal therapeutic environment for the treatment and management of eating disorders. It is part of a complex that shares a ward and, currently, at one end of the ward are patients that can have serious mental illnesses, so it is quite a challenge currently to manage those two sets of clients within a single ward, albeit one set of patients seem to be at one end and another at the other. It is not an ideal therapeutic environment.

I know there are many people who have been treated in 4G and have a strong attachment to that ward. Of the hardworking medical and nursing staff, many have worked there for many years providing magnificent care and treatment for these patients. Of course, it is not just the professional services that are provided there; there are all those support services as well—the cleaners, cooks, clerks, etc.—so it takes a significant team of people to provide the level of care and amenity for good treatment of patients in this environment.

It is less than an ideal environment and, as a former nurse, I can say that quite categorically. I very much support the Minister for Health in the review that he is currently conducting—a statewide review on the best way to construct, design and manage treatment and services for eating disorders. He is committed to full and extensive consultation with all relevant stakeholders, and I believe that is currently being undertaken. As I said, in terms of the detailed responses, I will be happy to pass those on to the Minister for Health in another place and bring back a response.