

TO: Office of the Chief Psychiatrist, Department of Health WA

Dear Dr Gibson,

We write on behalf of concerned residents and parents in Mount Claremont and surrounding suburbs regarding the proposed expansion of forensic mental health services at the Graylands campus.

This proposal has progressed without direct notification, consultation or meaningful information being provided to the immediate surrounding residents, school communities or the suburb more broadly. Most residents did not understand that Graylands was being positioned for a major forensic expansion. We have only become aware of the scale and implications of the project through our own research and have subsequently taken it upon ourselves to inform the wider community through our website and community communications.

We are writing to you because of your role as Chief Psychiatrist and your responsibility for standards, safety, quality and oversight of mental health treatment and care in Western Australia.

We respectfully ask you to consider the Graylands proposal not simply as a health infrastructure project, but from the perspective of patient care, site suitability, community interface and risk, and to consider whether the current strategy should be independently reviewed before the site becomes locked in any further.

At the outset, we want to be clear about what we are — and are not — saying.

We support investment in forensic mental health services. People with mental illness who come into contact with the justice system are entitled to humane, contemporary and properly resourced specialist care. Western Australia clearly needs substantially greater forensic mental health capacity.

Our concern is whether Graylands is the right place to build that capacity at the scale now contemplated.

For years, the public message around Graylands was that it was ageing, no longer suited to contemporary mental health care and would be progressively decommissioned. The surrounding community reasonably understood that the long-term direction was away from a large institutional psychiatric campus at Graylands.

We now understand that this direction has changed very substantially, and that Graylands is instead being positioned to become the centre of a major expansion of Western Australia's forensic mental health system.

The question is not whether WA needs forensic mental health beds. It is where they should be located.



Graylands Hospital and the surrounding Mount Claremont residential, education and recreation precinct. The map shows the relationship between the proposed forensic expansion area, John XXIII College, Quintilian School, Moerlina School, Mount Claremont Primary School, nearby sporting grounds, public spaces and surrounding residential streets.

The map illustrates why residents believe site suitability must be considered as a central clinical and planning question rather than treated as settled simply because Graylands already provides mental health services.

This is not an isolated institutional site. The hospital is embedded within an established residential, education and recreation precinct. John XXIII College shares a boundary with the proposed expansion area. Quintilian School is across the road. Moerlina School and Mount Claremont Primary School are also nearby.

Around those schools are homes, sporting grounds, parks, bus stops, pedestrian routes and residential streets used throughout the day.

Publicly available material refers to Stage 1 delivering 32 new sub-acute male forensic mental health beds, an eight-bed child and adolescent forensic mental health unit and associated patient services and rehabilitation infrastructure.

Our understanding is that this would substantially increase forensic capacity at Graylands, with the longer-term planning discussed publicly involving approximately 136 forensic beds together with additional mental health recovery beds.

Residents have repeatedly been reassured that the present development is “only Phase 1”. That is not reassuring!

If Phase 1 is the extent of the project, it does not resolve WA's acknowledged shortage of forensic mental health capacity. If later phases remain part of the strategy, the community is entitled to understand the ultimate scale, footprint and operating model before the site becomes effectively irreversible.

Either way, describing the project as "only Phase 1" avoids the more important question:

*What is the full long-term plan for Graylands?*

And, more fundamentally:

*Why was an ageing and constrained hospital site embedded within an established residential, school and recreation precinct selected for the State's major forensic mental health expansion instead of a contemporary purpose-built site selected specifically for that function?*

The significance of the map is not simply proximity. It is how the site intersects with ordinary life.

The surrounding streets, footpaths, bus stops, parks and sporting grounds are not theoretical planning buffers. They form part of residents' everyday lives.

On an ordinary weekday:

- bullet children walk or cycle to and from school, sometimes without a parent;
- bullet students wait at local bus stops before and after school;
- bullet younger children attend sport and training on nearby ovals;
- bullet teenagers walk between school, sporting facilities, friends' homes and public transport;
- bullet residents walk their dogs around the campus perimeter and adjoining streets;
- bullet people jog, exercise and use local parks early in the morning and in the evening;
- bullet parents walk with younger children or push prams through the neighbourhood;
- bullet residents leave for work, return home, collect children and move through these streets throughout the day; and
- bullet families allow children increasing independence precisely because this has traditionally been regarded as a safe residential neighbourhood.

These are not exceptional circumstances. They are ordinary suburban life.

The planning question is therefore not simply whether a secure forensic facility can technically operate at Graylands.

It is whether the State has properly considered the interface between a substantially larger forensic service and the thousands of ordinary movements occurring immediately around it every week.

We are not suggesting that every forensic patient presents a danger to the community. That would be neither accurate nor fair.

Rather, we are asking whether a decision involving patients with differing levels of clinical acuity, forensic history, rehabilitation needs and leave arrangements has been subjected to a proper low-frequency, high-consequence risk assessment, particularly given the close relationship between this site and schools, homes and public spaces.

### **Contemporary forensic care makes location more important, not less.**

We understand that contemporary forensic mental health care does not involve keeping every patient permanently behind a secure perimeter.

Recovery, rehabilitation, step-down care, escorted and unescorted leave and eventual community reintegration are legitimate parts of modern forensic practice. That makes location more important, not less.

The Criminal Law (Mental Impairment) Act 2023 now provides the legal framework within which review, leave, supervision and staged community return operate.

Our concern is that the Graylands site direction appears to have been established before this changed legislative framework came into effect.

We have seen no public evidence that, following commencement of the new legislation, there was a fresh assessment of:

- bullet the suitability of Graylands for a substantially larger forensic campus;
- bullet how escorted and unescorted leave would interact with the surrounding residential environment;
- bullet the proximity of nearby schools;
- bullet absconding or failure-to-return scenarios;
- bullet school notification and emergency protocols;
- bullet community safety planning; or
- bullet whether the changed legal and clinical operating environment affected the original site-selection decision.

If such assessments have been undertaken, we believe the affected community should be able to understand their conclusions.

### **The child and adolescent forensic unit requires particular consideration**

We are also concerned about the proposed eight-bed child and adolescent forensic mental health unit.

We fully accept that young people in contact with the justice system who have serious mental health problems deserve specialist, humane and contemporary treatment.

Our question is again one of location and interface.

Has there been a specific assessment of placing a child and adolescent forensic unit in such close proximity to primary and secondary school communities?

In particular, has consideration been given to the consequences of a serious behavioural incident, attempted absconding, lockdown or emergency police response, and how such an event would interface with adjoining schools and public spaces?

Have Quintilian School, Moerlina School, John XXIII College and Mount Claremont Primary School been consulted about what emergency communication, lockdown, notification or liaison arrangements they would require?

These questions should be addressed before the facility is built, not after an incident occurs.

### **Existing experience cannot be treated as community consent**

Residents are repeatedly told that forensic services already operate from the Frankland Centre.

We recognise that.

The community has coexisted with a much smaller forensic service for many years.

But historical acceptance of the existing service should not be interpreted as consent to a several-fold expansion, particularly when residents simultaneously understood that Graylands itself would eventually be decommissioned.

Residents also report incidents involving people apparently receiving treatment at Graylands in surrounding streets, including people entering private properties, climbing into backyards, standing in traffic, shouting abuse or threats and appearing significantly unwell while outside the hospital grounds.

We appreciate that individual incidents may have different clinical circumstances and that not every person outside Graylands is a forensic patient.

That is precisely why we are asking for evidence rather than assumptions.

What is the existing pattern of leave, unauthorised absence and community incidents, and how has that evidence informed planning for a substantially expanded forensic service?

### **Community concern should not simply be characterised as stigma**

We are concerned by suggestions that opposition to, or questioning of, this project is driven by stigma towards people with mental illness.

We reject that characterisation.

Supporting forensic mental health care does not require a community to accept that every site is equally appropriate for every forensic service.

Questions about scale, security, leave arrangements, school proximity, absconding, emergency communication, rehabilitation, site constraints and community safety are questions that should form part of the planning of any major forensic facility.

A parent asking whether their child can continue walking home from school, waiting alone at a bus stop, riding to sport, walking the dog or using a nearby oval is not making a judgement about the worth of another human being.

They are asking whether the State has properly assessed the environment in which both groups will be expected to coexist.

If there are robust safeguards, protocols and risk controls, transparency about those measures should strengthen public confidence rather than undermine it.

### **The location also matters for patients**

There is another side to this issue.

If surrounding communities become increasingly anxious about forensic leave and community access because of the immediate proximity of homes and schools, that may ultimately make rehabilitation and reintegration more difficult for patients themselves.

A contested location could increase pressure for more restrictive leave arrangements, increase community resistance and ultimately contribute to the stigma that good forensic mental health planning should seek to reduce.

Patients deserve a therapeutic environment selected around their long-term clinical needs — not simply a site that is administratively available.

If Graylands has previously been regarded as outdated and unsuitable for modern mental health care, it is reasonable to ask why the response is now to invest hundreds of millions of dollars into making that same constrained campus central to WA's future forensic mental health system rather than developing a contemporary purpose-built facility.

The site also carries heritage and environmental constraints, including the nearby wastewater treatment plant odour buffer affecting parts of the campus.

Infrastructure WA identified the rapid development of the business case, the complexity of the proposal, significant interdependencies and unresolved cost and delivery risks, including risks associated with heritage buildings and site constraints.

Yet the project has progressed without the affected community being shown how those issues were resolved, why Graylands remained the preferred site or how risks to surrounding schools and residents were assessed.

We are additionally concerned that future capacity pressures may result in forensic services progressively extending beyond the presently identified footprint. We understand that 15 beds in Dryandra ward have already been converted to forensic use outside the Frankland secure perimeter.

This makes clarity about the ultimate Graylands plan particularly important.

### **Questions we respectfully ask you to address**

We would appreciate your response to the following:

1. Were you or the Office of the Chief Psychiatrist involved in GRAFT — the Graylands Reconfiguration and Forensic Taskforce — or otherwise involved in advising on the decision to retain Graylands as the preferred site for expanded forensic services?
2. If advice supporting Graylands was provided, did it specifically consider the scale now contemplated, the proximity of surrounding schools and homes, and the suitability of the site for rehabilitation, leave and community reintegration?
3. Has the suitability of Graylands been formally reviewed following commencement of the Criminal Law (Mental Impairment) Act 2023?
4. Has any school-specific or community-specific risk assessment been undertaken covering absconding, failure to return from leave, serious behavioural incidents, emergency police response and interaction with surrounding public spaces?
5. What notification and emergency-response protocols are proposed for nearby schools if a forensic patient absconds, fails to return from leave or presents a material risk in the immediate area?
6. Will escorted or unescorted leave associated with the expanded forensic and rehabilitation services occur within the surrounding Mount Claremont area, and how has that community interface been considered in the site-selection process?
7. Has a specific risk and emergency-interface assessment been undertaken for the proposed child and adolescent forensic unit because of its proximity to local schools?
8. In your professional view, does Graylands provide the therapeutic environment, physical space, security arrangements and community interface required for a modern statewide forensic mental health campus of the scale contemplated?
9. Have you recommended, or would you support, an independent reassessment of whether a purpose-built forensic mental health facility on an alternative site would provide a better long-term outcome for patients, staff and the wider community?

## **What we are asking of your Office**

We have written to relevant Ministers, our local Member of Parliament and the City of Nedlands. More than 350 people have signed the community petition and this is growing! We are seeking further information through Freedom of Information processes and Parliamentary Questions, and the issue is now attracting media attention.

However, we believe the Office of the Chief Psychiatrist brings a different and particularly important perspective.

We respectfully ask that you:

- bullet confirm the extent of your Office's involvement in the Graylands site-selection and planning process;
- bullet independently consider whether the original site-selection remains appropriate given the proposed scale, the Criminal Law (Mental Impairment) Act 2023 and the surrounding school and residential environment;
- bullet seek or review the relevant site-selection analysis, school and community risk assessments, leave framework, security assessment, absconding protocols and emergency-notification arrangements;
- bullet advise the Minister for Mental Health and the Department of Health if, in your professional view, further independent review of the Graylands site is warranted before irreversible construction and planning decisions are made; and
- bullet provide the community with a written response addressing the issues raised in this letter.

We believe good forensic mental health care and community safety should not be framed as competing objectives.

Patients deserve a contemporary, humane and purpose-built service.

Residents deserve confidence that ordinary life around their homes and schools has been properly considered.

Children should be able to walk home from school, wait for a bus, ride to sport, walk the dog or use their local oval without their parents discovering only after construction that significant changes to the surrounding environment were never discussed with them.

Taxpayers deserve to know that a project of this scale has been located where it can provide the best service for decades to come, rather than where it may simply have been administratively easier or quicker to commence.

We therefore ask for your independent consideration of a simple but fundamental question:

*Is Graylands genuinely the best site for Western Australia's future forensic mental health system — for the patients who will receive care there as well as the community that will live alongside it?*

We would appreciate a response within 14 days, given the project is progressing and the community is increasingly concerned that significant and potentially irreversible decisions are being made before these questions have been answered.

Yours sincerely,

Paul

For and on behalf of concerned Mount Claremont residents and parents

Mount Claremont Community Network

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Community website:

<https://mtclaremontcommunity.github.io/graylandsforensic/>