



Secretary

Department of Health

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Nicole D'Rozario
Coroner's Registrar
Coroners Court of Victoria
Via e-mail: cpuresponses@coronerscourt.vic.gov.au

Dear Ms D'Rozario

Thank you for your letter of 8 October 2024 attaching Coroner David Ryan's finding without inquest into the death of Danielle Thomson. My sincere condolences go to Ms Thomson's family, friends and community.

Coroner Ryan has made two recommendations for the Suicide Prevention and Response Office within the Department of Health (the department). My responses to the coroner's recommendations are set out below.

Recommendation 1: That the Suicide Prevention and Response Office of the Department of Health examine the relationship between chronic pain, mental illness, substance abuse and suicide to seek to identify strategies that may be available to address the clinical dilemma facing clinicians that people who experience chronic pain along with mental illness (and substance abuse) often do not respond effectively to treatment of their chronic pain.

My department already leads a number of programs and initiatives that acknowledge and seek to address the confluence of mental illness, chronic pain, substance use and suicide.

Indeed, the Royal Commission into Victoria's Mental Health System (the Royal Commission) heard that many Victorians with multiple health challenges struggle to access holistic care and navigate complex health and mental health systems. Below, I have provided a summary of actions taken by my department that seek to implement the Royal Commission's recommendations and that more broadly address suicide prevention and response, and the management of chronic pain with co-occurring mental illness and substance use.

Supporting people living with mental illness and substance use or addiction

In March 2022, the Victorian Government appointed Turning Point to establish a new statewide service for people living with mental illness and substance use or addiction. The Hamilton Centre was established as a specific response to recommendation 36 of the Royal Commission, to provide specialist treatment, secondary consultation, education, training and research. The Hamilton Centre aims to create a more inclusive and supportive experience of care through building integrated care capability across mental health and wellbeing, as well as alcohol and other drug systems.

Recommendation 35 of the Royal Commission recommended that all mental health and wellbeing services provide integrated treatment care and support to people living with mental

illness and substance use or addiction and not exclude consumers living with substance use or addiction. Working in partnership with lived and living experience, service providers and workers, the department has developed '[Guidance for Victorian mental health and wellbeing and alcohol and drug services: Integrated treatment, care and support for people with co-occurring mental illness and substance use or addiction needs](#)'. The guidance contains 11 expectations for service providers that are underpinned by four principles for the delivery of integrated treatment and care.

Chronic pain management

The management of chronic pain, especially where a person has concurrent substance use or addiction, often requires care from a specialist chronic pain management team. In Victoria, there are 21 such dedicated multidisciplinary chronic pain management services available at public hospitals. Improving access to these services, especially for patients residing in regional Victoria, will remain a focus for my department.

In that regard, since 2018 the department has worked with clinicians to develop statewide referral criteria for specialist clinics to improve the referral pathways. As at December 2024, there are over 120 statewide referral criteria, including nine related to chronic pain. One criterion specifically relates to people with chronic pain that requires complex medication management ([Pain that requires complex medication management](#)). The statewide referral criteria are incorporated into primary care platforms to assist clinicians to refer patients ([Primary health networks and health pathways](#)).

Community health services

Victoria's 79 [Community Health Services](#) (24 registered, 55 integrated) are important providers of health and social care, present in every local government area, with a particular focus on vulnerable and disadvantaged populations. These services employ allied health and nursing professionals to best meet the needs of their communities. In particular, Merri Health, IPC Health and cohealth all deliver chronic pain programs, with Merri Health's multidisciplinary Chronic Pain Service having supported nearly 300 people in Melbourne's northern suburbs to better manage their pain and improve their quality of life.

Suicide prevention and response

In September 2024, and in response to recommendation 26 of the Royal Commission, the Victorian Government launched the [Victorian suicide prevention and response strategy 2024-34](#). The strategy aims to build a systems-based, evidence-informed, whole-of-government and community-wide approach to suicide prevention and response. It has been developed with people with a lived experience of suicide and was shaped by extensive consultation with clinicians and other experts in the field.

The strategy addresses the substance of the coroner's recommendation in the following Priority Areas:

Priority Area 1: to enhance the accessibility and integration of mental health, alcohol and other drug, and suicide prevention systems in Victoria by improving navigation between support services and connections across various care systems.

Priority Area 3: to build a compassionate, trauma-informed workforce with a strong understanding of suicide and its contributing factors, supporting clinical and non-clinical staff in a range of health and other settings to be equipped to support those in suicidal distress.

Priority Area 6: to identify critical gaps in suicide prevention and response knowledge and to advance research, engagement and partnerships to continuously improve understanding, including learning from other jurisdictions.

To support implementation, an accountability framework and rolling implementation plan accompany the strategy. This approach will enable the Victorian Government to respond flexibly to emerging issues and new evidence across the life of the strategy, and shift approaches, as required, following evaluations.

The strategy's *First implementation plan 2024-2026* includes initiatives recommended by the Royal Commission and other priorities. Initiative 6.2 involves the department continuing to build its understanding of existing evidence and emerging research to help shape future responses, including by supporting the research function of the Victorian Collaborative Centre for Mental Health and Wellbeing. The Centre has recently released its [Translational research strategy 2024-2027](#), a priority of which is supporting and amplifying culturally responsive, intersectional approaches to care. Through the scoping and implementation of this initiative, the department will consider existing research by subject matter experts in pain management, mental health and alcohol and other drugs to identify opportunities to respond to the coroner's recommendation. This may also include findings from the department's [Inquiry into Women's Pain](#), which aims to address the challenges faced by girls and women seeking pain care.

Recommendation 2: The Suicide Prevention and Response Office liaise with the Commonwealth Department of Health and Aged Care regarding the National Strategic Action Plan for Pain Management to identify areas of mutual interest concerning the relationship between chronic pain, mental illness, substance abuse and suicide.

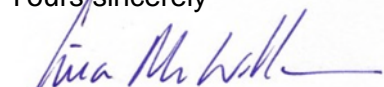
The department supports this recommendation. Under Priority Area 5, the Victorian strategy seeks to drive whole-of-government collaboration and innovation. Objectives include collaboration with the Commonwealth, state and territory governments and government partners, including Gayaa Dhuwi (Proud Spirit), to deliver a coordinated national approach to suicide prevention and response; and working with the Commonwealth Government and Victorian Primary Health Networks to deliver a coordinated approach in Victoria.

To deliver these objectives, the Suicide Prevention and Response Office works closely with the National Suicide Prevention Office and the Suicide Prevention and Priority Populations Branch within the Commonwealth Department of Health and Aged Care, including through the implementation of the *National mental health and suicide prevention agreement* (and associated Bilateral Schedule) and the forthcoming *National suicide prevention strategy*.

The department will continue to liaise with the Commonwealth via these channels regarding the National strategic action plan for pain management, and to identify areas of mutual interest concerning the relationship between chronic pain, mental illness, substance use or addiction, and suicide.

I trust that this information is of assistance.

Yours sincerely



Professor Euan M Wallace AM

Secretary

06/01/2025