



Canberra
Health
Services



ACT
Government

North Canberra Hospital Mental Health Consultation Liaison Team Expansion of Hours

Mental Health, Justice Health, Alcohol and Drug
Services (MHJHADS) – Adult Inpatient Mental Health
Services (AIMHS)

February 2026



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Introduction

Canberra Health Services (CHS) is focussed on the delivery of high quality, effective, person-centred care. It provides acute, sub-acute, primary and community-based health services to the Australian Capital Territory (ACT) —a catchment of approximately 475, 000 people. It also services the surrounding Southern New South Wales region which includes the Bega Valley, Bombala, Cooma-Monaro, Eurobodalla, Goulburn, Mulwaree, Palerang, Queanbeyan, Snowy River, Upper Lachlan Shire and the Yass Valley.

CHS administers a range of publicly funded health facilities, programs and services including but not limited to:

The Canberra Hospital: The Canberra Hospital is a modern 600-bed tertiary hospital, providing trauma services and most major medical and surgical sub-specialty services. The hospital is the largest in the region and services a catchment across the ACT and the surrounding regions and includes the Centenary Hospital for Women and Children. The hospital is located in the suburb of Garran.

North Canberra hospital: North Canberra Hospital is located in north-west Canberra in the suburb of Bruce. The hospital provides acute care public health and hospital services and serves a catchment across the ACT and the surrounding regions.

University of Canberra Hospital: University of Canberra Hospital (UCH) is the largest purpose-built rehabilitation centre in the ACT and surrounding region, with capacity for 140 inpatient beds, 75-day places and additional outpatient services. As a sub-acute care facility, UCH provides a supportive environment for people needing rehabilitation or mental health care.

Mental Health, Justice Health, Alcohol and Drug Services: Mental Health, Justice Health and Alcohol & Drug Services (MHJHADS) provide health services directly and through partnerships with community organisations. The services provided range from prevention and treatment to recovery, maintenance and harm minimisation. Consumer and carer participation is encouraged in all aspects of service planning and delivery. The Division works in partnership with consumers, carers and a range of government and non-government service providers to ensure the best possible outcomes for clients. The Division delivers services at a number of locations, including hospital inpatient and outpatient settings, community health centres, detention centres, other community settings including peoples' homes.

Purpose

The purpose of this paper is to propose the extension of the hours of operation of the North Canberra Hospital (NCH) Mental Health Consultation Liaison (MHCL) team. The NCH MHCL team currently operates extended hours on Monday to Friday (0700-2130) and business hours on weekends and public holidays. This proposal aims to transition the service to extended hours coverage seven days a week and public holidays.



The proposed change supports improved access to mental health assessment and consultation across the NCH Emergency Department and inpatient areas, ensuring timely and consistent MHCL availability. Funding and FTE required to implement this change were secured in 2025–26, with recent recruitment activities completed to enable service expansion.

The proposed changes apply to nursing and allied health MHCL staff, and consultation is required with the relevant unions representing these disciplines.

Current Model

The NCH MHCL team operates as a standalone service with its own interface documents, service description, and care pathways. The team is staffed by clinicians with advanced skills in mental health assessment, formulation, and care planning, who provide specialised consultation to the Emergency Department and inpatient areas. The current recruitable FTE leads to overstaffing on some shifts, which is an inefficient use of resources.

NCH MHCL Clinician Coverage

- Reduced hours MHCL service.
- No MHCL clinician service in the evenings on weekends and public holidays
- Service provided to the emergency department and all wards
- Coverage:
 - Weekdays - 2x Clinician per morning shift - 0700 – 1530
 - Weekdays - 3x Clinician per evening shift - 1300 – 2130
 - Weekends 2-3x Clinician per day- 0700 – 1700
- Staffing profile – 8 FTE. Made up by:
 - 2x HP 3
 - 6x RN 3.1

The NCH MHCL team reports to the NCH Mental Health Assistant Director of Nursing (MH ADON). The NCH MH ADON reports directly to the Adult Inpatient Mental Health Services (AIMHS) Operational Director.

Rationale for change

The NCH MHCL does not provide a 24/7 services, or an extended hours service on weekends and public holidays - this can result in delays in specialised mental health team review, and disposition planning.

Extending the MHCL service to operate extended hours seven days a week, including public holidays, will improve timely mental health assessment and support for the NCH emergency department and inpatient units. Recent funding confirmation for previously unfunded



positions, and successful recruitment to these positions, make this expansion operationally achievable, more efficient, and sustainable.

Extended MHCL coverage also aligns with the broader integration of NCH mental health services under MHJHADS governance (implemented in July 2025), strengthening leadership, accountability, and clinical oversight. This service improvement supports the CHS vision of delivering exceptional, accessible healthcare (CHS Strategic Plan 2024-2029).

Future model

Scope of future model

Proposed MHCL clinician coverage for NCH:

- All days - 2x Clinicians rostered per morning shift from 0700 till 1530
- All days - 2x Clinicians rostered per evening shift from 1300 till 2130

Benefits of the future model

Extending the NCH MHCL service hours will support more consistent service delivery and clearer expectations for staff across all days of the week.

A broader span of service coverage will enable more flexible and responsive deployment of MHCL resources across the NCH Emergency Department and inpatient units. This model allows rostering to better align with periods of peak demand and provides a more balanced distribution of clinical workload across the week.

Providing extended hours seven days per week, including public holidays, will improve the timeliness of mental health assessment and care planning. This will reduce delays in clinical decision making, enhance patient flow, and support more effective and appropriate disposition outcomes for consumers.

Implementation of the future model

The proposed model will have no impact on the existing TCH MHCL services, however, will allow broader scope for staff to work across both services to maintain our current high standards of clinical service delivery. We hope to have the consultation occur in the first 2 weeks of February, allowing an additional week or two to review the feedback and possibly incorporate any alternate ideas. If the consultation is endorsed this will be articulated in the Decision Paper. An Evaluation Paper would be provided within 6-12 months after full implementation.

Roster changes will occur at the earliest possible time following the Decision Paper being provided.

Related change processes

There are no other processes / projects that will be impacted by this proposed change.



Implications for not undertaking change

If the proposed extension of MHCL service hours at NCH is not implemented, the service will continue to operate with limited after-hours coverage. This will maintain the current delays in accessing specialised mental health assessment and consultation during weekends and public holidays.

Without extended hours, delays in disposition planning and mental health review will not improve and will continue to impact patient flow within the emergency department and inpatient units, leading to inconsistent access to specialist mental health support.

The service will also miss an opportunity to better align staffing coverage with service demand, resulting in ongoing pressure on emergency department clinicians and reduced capacity to provide timely and coordinated mental health care.

Consultation methodology

This proposal provides more detail in relation to the extension of hours for NCH MHCL team. There are still details that need to be determined and your feedback, suggestions, and questions will assist in further refining this proposal.

Feedback can be provided via email to CHSGMMHJHADS@act.gov.au

In particular, we are seeking responses to the following questions:

- Do you have any concerns about the proposal, if so, what are they?
- Do you have any other feedback you would like to be considered in relation to extending the NCH MHCL hours of coverage?
- How can management support you during this transition?

For any further information relating to the amalgamation and subsequent consultation process, please contact Shaun Bayliss at CHSGMMHJHADS@act.gov.au

The proposed timeline for the consultation period will be as follows.

Step	Action	Date
1	Letter to Union and consultation paper circulated	20 February 2026
3	Consultation period commences	20 February 2026
4	Staff forum with NCH MHCL team	26 February 2026 5 March 2026
5	Consultation period closes	6 March 2026



Step	Action	Date
6	Feedback Summary circulated and Consultation process closed via Decision Paper	+1-2 weeks close

For any further information relating to this proposal and consultation process, please contact Shaun Bayliss at CHSGMMHJHADS@act.gov.au

References

Document	Author
Canberra Health Services Strategic Plan	CEO, Canberra Health Services

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Acknowledgement of Country

Canberra Health Services acknowledges the Ngunnawal people as traditional custodians of the ACT and recognises any other people or families with connection to the lands of the ACT and region. We acknowledge and respect their continuing culture and contribution to the life of this region.

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