

Your contribution

Should you wish to make a formal submission, please consider the questions below, noting that you do not have to respond to all of the questions, instead you may choose to respond to only some of them.

1. What are your suggestions to improve the Victorian community's understanding of mental illness and reduce stigma and discrimination?

2. What is already working well and what can be done better to prevent mental illness and to support people to get early treatment and support?

In my sons case nothing was working well!

3. What is already working well and what can be done better to prevent suicide?

4. What makes it hard for people to experience good mental health and what can be done to improve this? This may include how people find, access and experience mental health treatment and support and how services link with each other.

5. What are the drivers behind some communities in Victoria experiencing poorer mental health outcomes and what needs to be done to address this?

6. What are the needs of family members and carers and what can be done better to support them?

more interaction with family by mental health workers.

7. What can be done to attract, retain and better support the mental health workforce, including peer support workers?

8. What are the opportunities in the Victorian community for people living with mental illness to improve their social and economic participation, and what needs to be done to realise these opportunities?

9. Thinking about what Victoria's mental health system should ideally look like, tell us what areas and reform ideas you would like the Royal Commission to prioritise for change?

Families to have more power to deal with
& get mental illness sufferers into hospital

10. What can be done now to prepare for changes to Victoria's mental health system and support improvements to last?

11. Is there anything else you would like to share with the Royal Commission?

Privacy
acknowledgement

I understand that the Royal Commission works with the assistance of its advisers and service providers. I agree that personal information about me and provided by me will be handled as described on the Privacy Page.

☒ Yes ☐ No

I WAS asked to submit this to
Royal Commission by

10 PAGES.

Jan 2019

Mental Health
Tribunal



Your report to the Mental Health Tribunal – for patients and their carers/ nominated persons

The Mental Health Tribunal conducts hearings to make decisions about whether a person should be subject to a Treatment Order and for how long.

Your treating team will prepare a Report on Compulsory Treatment, which outlines why they think you need to be treated under a Treatment Order. They must give this report to you at least two days before your hearing. The Tribunal members will read your treating team's report just before your hearing starts.

The Tribunal also wants to know what you think about the need for a Treatment Order, and what - if any - support you think you need for your mental-health. If you wish, you can use this form to help prepare what you would like to tell the Tribunal. If there is not enough space you can attach additional pages. If you have an advance statement, you may attach it to this form.

It is important that you attend your hearing so the Tribunal members can talk to you directly about your wishes and opinions. At the hearing you can also ask questions about what your treating team is telling the Tribunal. If you attend your hearing you can give this form to the Tribunal members who will read and consider what you have written. Or you may prefer to use this form as a reminder of the things you want to tell the Tribunal.

If you are a carer or nominated person for a person who is having a Tribunal hearing, you may also use this form to express your views to the Tribunal. Information provided by a carer or nominated person using this form will be discussed with the patient at the hearing.

Your details	
Name:	[REDACTED]
Hearing date:	[REDACTED]
If you are a carer or nominated person, who are you providing information on?	
<p>These are some suggestions about what you may want to tell the Tribunal about:</p> <ul style="list-style-type: none"> How you feel about being on a Treatment Order How you think your treatment is going 	<p>Would kindly appreciate you taking time to look at attached letters given to tribunal hearings in the past with all our concerns</p> <p>Please ensure [REDACTED] stay on current medications and on C.T.O. - only way we can allow him time to recover considering his history of non-compliance and frequent psychotic episodes</p> <p>Further down is the need to stay on long term medication and intense monitoring</p> <p>Thanking You</p> <p>[REDACTED]</p>

22/4/16

Dear [REDACTED]

Attached to this is a letter presented at hearing dated 6/8/15 during his last admission to [REDACTED] hosp just 6 mths ago.

With none of our concerns being addressed at that time we now have the same situation (but worst this time) happening again.

This time with more violence and death threats and lack of assistance from relevant treating teams, releasing him each time presented to hospital.

This is now the 4th admission with nothing changed, [REDACTED] still has no recognition of his illness and repercussions and the damages not just physically but emotionally to us all.

It's just sheer luck that nobody to date has been seriously hurt.

Since being discharged last year on 20/8/15 there has never been any follow up family meeting or contact from his treating team to us or even to inquire as to how he was going at home.

Which is unacceptable given his history of non-compliance.

Dr. [REDACTED] at [REDACTED] hosp recommended at the time he needed long term 'depot' and

intensive monitoring eg MST team for at least 12-18 months or longer.

He has never taken any of his daily tablets (Even though he will insist he did) but at least the fortnightly depot kept things under control to a degree but when that was ceased after a short time (as always in the past he quickly becomes very unwell becoming irrational, self-centred, taking risky behavior with wild paranoid thoughts and endangering others.

One example is impulse buying when on 9/1/16 we were very worried when on a spur of the moment spent a lot of money on a powerful car - 6 days later having a serious car accident (luckily no-one was killed) hitting a pole and 2 cars with children taken to hosp. His car was a 'write off'. He is still to face charges and repercussions for this

Sun 20/3 he went 'berserk' home alone with his father (luckily all the family who were visiting including his 2 children aged 2 + 4 and his niece, only 4 months old had just left)

Everything was smashed his children's toys holes in walls, smashed glass and threw large

14/10/16
Facing
Court on
7/11/16
total
24 charges
which would
mean his under
stress at
moment

objects about, there was blood everywhere
His excuse was "GOD MADE ME DO IT"

Police took him to [REDACTED] hosp but he was released.

Reluctantly we had to take out Intervention Orders as he was very manic and on the streets until the 29th. but [REDACTED] being mentally unstable ignored these orders and kept returning and phoning with threats.

We kept reporting to the CAT team and the police as he was doing weird ~~things~~ dangerous things and we were terrified for him and us all.

The morn of the 24th was horrendous when he was 'pepper sprayed' all through our house was taken straight to hosp to be released again - then taken to [REDACTED] courts by police, went berserk in the court, taken to [REDACTED] hosp by police but released again!

Between the 20th - 29th we were constantly calling police and CAT team for help as he was out of control, homeless, spending ridiculous amounts of money on taxis everywhere, copious amounts of chocolates & lollies (I have all receipts) he said 'to give presents to his father' as well as all the death threats.

This all could've been avoided if he had've been kept in hosp when taken by police on Sun 20th. Now he has multiple court charges for breach of IVO's and it took until Tues 29th when he was arrested for stealing donuts at 7/Eleven and the magistrate and court sent him finally to hosp. There needs to be something on the system to alert hosp E/D to ensure if he relapses again he is not just turned away!

Now everyone who is closest and cares for him the most (parents/partner) and have been looking after him and monitoring his behavior & treatment all have IVO's against him.

Just on Tues 19/4 he said "he was going to stalk and ambush his father when least expected and kill him (this clearly shows he's still very unwell) and sent text to his father "I'm going to put you through the wall"

The system up to date is not only failing him by not allowing time for him to recover properly but also failing all his family as well, his 2 children not understanding "what's happened to Daddy?"

He clearly needs as been advised by [REDACTED] ([REDACTED]) and Dr [REDACTED] that he would need long term depot and monitoring to enable the opportunity for recovery

Also would like to bring to your attention on Mon 4/4 at lunchtime [REDACTED] was given 1/2 hr unsupervised leave. In all past admissions had never been given leave except with a nurse or family because of his history of absconding, result he never returned, considering there were serious death threats to us all and his partner we were terrified. Police finally got him late next day and returned him to hosp.

The hosp has failed in their Duty of Care to him and all we got from Dr Duur was "Sorry I made a mistake" Just another example of negligence with his care.

Please how much do we all have to suffer before he gets the right treatment and care.

There needs to be a different approach to his treatment than what's been done before as its clearly not working.


There must be some way to monitor he takes his daily meds

- NOT JUST TAKE HIS WORD FOR IT -

It's heartbreaking that this has happened again and we beg of the board as we did on 4/8/15 to please help and come up with a more successful treatment plan and as he can't come home at the moment it's going to be very hard on us and for him when he finally comes to his senses as he has no family contact or support, has to face multiple court charges and more importantly no safe place to live.

The bottom line is we love and care and just ask for the best treatment and aftercare for our son, which hasn't been happening all the way along from hospitals, Dr's and Case Manager resulting in unacceptable behavior destroying his relationships with us and other family members. esp. his sisters, partner children and also his friends

Sorry for being so long and thank you for your time

Sincerely


4 Aug 2015.

To the M.H.B. Re- [REDACTED]

We'll try to keep this brief but there is so much more to [REDACTED]

This is [REDACTED] 3rd hospitalization still with no real understanding of his problems and the repercussions of risk to himself and others.

His CT.O ceased in MARCH '15 and I think his last depot in Jan.. But given time and continuously on depot we hope he may become well, but he never stays long enough on medication to give it a chance.

In the eyes of his treating team he was stable (eg. working and being involved with his family) but we saw otherwise with many times trying to express our concerns and not being taken seriously and with many stresses in his life (partner, a health problem with his son - ongoing at R.C.H., my upcoming hospitalization, his financial situation and many more). He quickly became very unwell and psychotic.

It was very obvious to all when he became abusive, violent + threatening and causing chaos to us, his own family and others as well as a neighbour (who reported to police [REDACTED] was breaking locks to access his house) and his female housemate who witnessed a lot and noted his irrational, manic

violent behaviour.

He was extremely agitated, argumentative, very angry with mood swings to laughing at everything - jumping from one thing to the next / not sleeping and excessive spending and with ridiculous demands to everyone.

- Spent nearly \$1000 (Sat 11/7) on unnecessary sportswear and we also found many purchases eg. 3 electric guitars (and he doesn't even play).

He refused to seek help when we all suggested and quickly became increasingly irrational + delusional especially paranoid about his mother and partner with wild accusations to the point his mother-in-law talked of an I.V. O against him.

He needed immediate treatment before he hurt himself or others and with his history we were all scared for our safety.

It took 4 days of endless phone calls to [redacted] hosp/CA team and police before anything was done and he was finally (after escaping 3 times from [redacted] E/D) hospitalized causing great distress all of us and to himself.

THIS SHOULD'NT HAVE HAPPENED!

[redacted] is a unusual, intelligent complex person who requires constant intense monitoring. Its not

fair on him and his recovery if he's not receiving the proper care for his illness

And it's not fair to all those who love him and know the kind, caring, productive person he can be - especially not fair for his 2 children who are already greatly affected by all this turmoil

His history shows he has a major problem complying. So we plead with the Board to 'Please' (for all our sakes) ensure he stays long term on a C.T.O., hopefully managed by a more intense caring team (M.S.T) this time to guarantee he receives the correct aftercare and medication.

We don't want this nightmare to happen again.

Thanking you for your time.

Sincerely Yours

4/2/18 Still things haven't changed and he had a relapse and [REDACTED] hosp on 31/12/18. refused to admit him and [REDACTED] got out of control and is now in Police custody at Ravenhall custody centre