2019 Submission - Royal Commission into Victoria's Mental Health System

SUB. 0002.0028.0167

What are your suggestions to improve the Victorian communitys understanding of mental illness and reduce stigma and discrimination?

N/A

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?

N/A

What is already working well and what can be done better to prevent suicide? N/A

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. N/A

What are the drivers behind some communities in Victoria experiencing poorer mental health outcomes and what needs to be done to address this? $\ensuremath{\mathsf{N/A}}$

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

"My 20 year old son developed a major mental illness in July 2017, he was hospitalised multiple times over the following 6 months (approximately 3 months of these as an inpatient - both recommended and voluntary) until he was finally diagnosed with Schizoid Affective Disorder, stabilised and discharged to a Prevention and Recovery Centre (PARC) for 4 weeks before coming home. Following his first admission he was assigned to a Mental Health Case Worker with Inner West Community Mental Health Service (known as Waratah). I cannot speak more highly of this service and would like the Commissioners to examine carefully the model of service that Waratah provides as it has been key in the tumultuous 6 months of my son's undiagnosed illness and multiple hospital admissions and more importantly in the gradual recovery phase of his illness over the past 2 years. Waratah has provided the following to our son and family; # Regular appointments with a Key Clinician/ Case Manager (allowing family members - mostly myself and my husband - to provide information & develop plans moving forward to support our son at the end of these appointments. it must be noted that in the 2 years, my son has had just 2 Key Clinicians. The stability of staff at Waratah is I think exceptional and the reasons for this should be examined by the Commissioners. I believe that some of the reasons for this are; 1. Waratah has a staff culture of respect, starting at the top and moving down through the service. Staff at Waratah appear to value their work and treat consumers with respect. Staff have said to me that

they regularly attend professional development opportunities & have regular staff meeting to discuss issues relating to mental health and their work. Appointments are nearly always on time. 2. At Waratah I understand that the CAT Team function is regularly rotated so that the crisis assessment work is sharded throughout the service in order that workers do not burn out or become too cynical or addicted to the adreniline rush of crisis work. i think this is an important element of crisis work that should be considered by the Commissioners. 3. Waratah provides families who have a member with a mental illness with the opportunity to attend a 'Multiple Family Group' which is a support group which meets fortnightly, after hours (6.30-8pm) every 2 weeks for a year. This has been an enormous support for my husband and I as well as our son. The MFG is staffed by a social worker and a nurse from Waratah and 5 families have been involved. While this is a big commitment from all attending, the benefits of this type of support for families has been enormous. being able to share our experiences with other families, feel that we are not alone and for our son to understand and see othes that have been living with a mental illness has been invaluable to his recovery and to our family's support. 4. Waratah additionally has provided our son with the opportunity to engage with an Exercise Physiologist, which has been useful for his physical health as he put on approximately 20 kilos due to side effects of anto psychotic medication. Th link between mental and physical health is now undisputed and for our son to meet the exercice physiologist in a mainstream gym (one of those participating in the RecLink program so the gym can be accessed at low or no cost) has been a contributing factor in our son's recovery from mental illness. "

What can be done to attract, retain and better support the mental health workforce, including peer support workers? N/A

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?

N/A

Thinking about what Victorias mental health system should ideally look like, tell us what areas and reform ideas you would like the Royal Commission to prioritise for change? N/A

What can be done now to prepare for changes to Victorias mental health system and support improvements to last?

N/A

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

"Most of my comments are captured under the section for support for families and carers but I would like to emphasise the imortance of adequately funded Area Community Mental Health Services in order that they can provide a suite of services to people living with and recovering from mental illness including; * Professional development opportunities for all staff * Ability to employ exercise physiologists, dieticians & other allied health staff as needed to support Consumers * Multiple Family Groups for an extended period of time (at least 12 months) to support families and carers as well as people living with a mental illness"