



WYNDHAM CLINIC  
PRIVATE HOSPITAL

**Submission to Royal Commission  
into Mental Health –  
The missing link – Mental Health  
Recovery Hospitals**

Wyndham Clinic Private Hospital  
June 2019



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## Introduction

Mental health care in Victoria is managed by public and private services. There are many services the public and private system provide well and, as has been documented, on many occasions vulnerable Victorians are let down. This can lead to devastating consequences for individuals and those around them. This year's report by the Victorian Auditor General's Office (VAGO) is, in our view, correctly focusing on the gap between supply and demand in the mental health system and observes that:

*"Until the system has the capacity to operate in more than just crisis mode, DHHS cannot expect to be able to make meaningful improvements to clinical care models or the mental health of the Victorian population." P8*



Capacity of the mental health system and its ability to cope with rising demands is also a strong theme in the terms of reference for this Royal Commission along with a necessary and strong focus on prevention and recovery.

This submission by Wyndham Clinic Private Hospital (WCPH) focuses on the need for public and private service providers to work collaboratively in order to increase capacity to deliver better outcomes. Recovery is an area that needs particular attention in order to facilitate meaningful recovery for the individual and, as we outline, if it is done well has a direct impact on reducing readmissions into crisis care.

As noted in the VAGO report, state services through the sheer force of numbers are limited to operating in almost all cases in crisis mode. Critical care services – in our view work well when they are provided as inpatient services and when the patient is most at risk of suicide or dealing with severe depression or as a result of involuntary admission. Such cases are often traumatic episodes, much like road accident trauma, life threatening events such as cardiac arrest or stroke that the wider health system caters for from admission through crisis, recovery and rehabilitation. Yet the response and treatment to mental health trauma is different – with almost all resources being directed to crisis management and little capacity for the other very necessary components of recovery.

### **Victoria has world's best practice in dealing with physical trauma**

It is commendable that here in Victoria victims of traumatic road accidents are treated in best practice emergency facilities with high quality surgical and other services provided to patients. A key part of this process is that once patients are stabilised, they are not discharged from an intensive care unit (ICU) or critical care unit (CCU) directly home. The state, appropriately for physical trauma, provides high quality rehabilitation initially in a hospital setting so that each patient can rebuild their life and gain independence allowing them to regain the best possible quality of life. The same cannot be said for most mental health 'recovering' patients.

The State's approach to physical trauma and the various services from emergency to ICU, then to a ward, then to a rehabilitation hospital, often leading to day rehabilitation to allied health support as an outpatient – evidences a system that responds to each patients' needs at each part of physical recovery.

As it should.

### **The existing mental health service structure in Victoria can't deliver full care and recovery**

Unfortunately, despite a clear awareness of the need for a full response, the systematic response to physical trauma outlined above is not so for mental health patients who also experience traumatic episodes. These patients, when emergency departments are not overflowing, receive appropriate acute care in public inpatient hospitals but due to constant demand for beds and severe bed pressure on the acute care setting often find themselves exiting care far too early – often with dire consequences. In far too many cases the patient is discharged back into the community, too early and without the necessary and/or equivalent rehabilitation support.

This step down from crisis to managing back in the community, even in supportive family or caring environments, is often too large which leads to a high readmission rate to acute care when the crisis factors re-emerge.

There are many factors that contribute to this unfortunate reality in mental health recovery.

- The clinical setting of public mental health facilities, largely dealing with mental health traumatic episodes, are also by design, not a therapeutic environment designed for recovery.
- Patients who are seeking to re-enter the community once their condition is stabilised are often challenged by other patients who may be experiencing psychotic episodes, are often violent or aggressive and are unaware or unaccepting that they need to recover.
- Patients who are discharged too early without the tools and skills to manage independently and without supportive recovery services are readmitted. At worst, they harm themselves or others. This must be prevented.

At Wyndham Clinic Private Hospital (WCPH), we have worked hard to develop an approach that focuses on full recovery and rehabilitation. Our team is selected with this in mind and as such, we are highly experienced and recognised as a facility that supports recovery and we are getting results.

Information regarding our service is provided in Appendix 1.





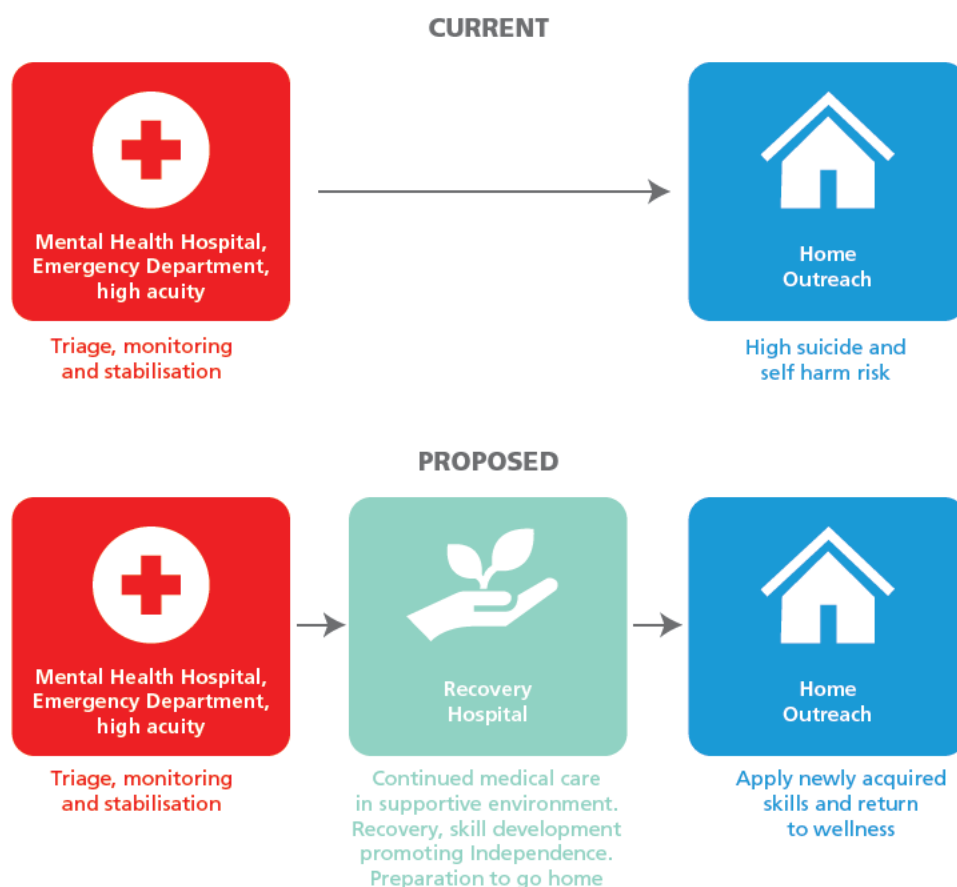
Like all private hospitals our patients voluntarily seek help and they have a desire to return to wellness. Our experience shows that patients benefit from a far less institutional setting than is usually provided because of scarce resources in the public system. Patients at WCPH enjoy a modern, health design standards compliant, secure yet therapeutic and home like environment with structured group and individual programs focused on developing skills and blending these with rehabilitation techniques to maximise recovery.

We have found that group therapy is enormously beneficial in promoting recovery. The sessions conducted by our trained staff provide patients with skills to manage their illness, to manage self-talk, share experiences with others and receive positive affirmation. Such sessions are not possible with patients who are still in crisis – i.e. not ready to recover. There is a clearly identified a gap in the system.

In effect, what we provide is akin to rehabilitation provided to public patients when they are discharged from hospital management of physical trauma. Figure one below compares the public structure with what we are able to offer.

We contend that public patients need access to similar recovery services in a hospital setting in what we can term a 'Recovery Hospital'.

**Figure 1: visual comparison of current verses best practice recovery model**



## The public mental health system needs to change

Even from our small private hospital we see the results of a total approach to recovery. In our view Victoria needs:

- dedicated recovery inpatient hospitals – ‘recovery centres’ for patients who have recovered from the acute trauma and who need support to manage their transition back to the community.
- Services provided in a supportive environment to people who are ready to recover are highly effective. Moreover, people we work with stress that they need services close to home so that family and loved ones are available to support the patient’s journey.
- Services that not only prescribe appropriate medications but also teach patients the skills they will need when they return to the community.
- Services that don’t force patients to leave before they have appropriate housing and community mental health support in place.

We acknowledge that while it would take time to construct facilities and train and deploy the essential mental health workforce, there is a need right now and also a short-term solution.

This is where the private system can help. Many private mental health inpatient hospitals in Victoria have capacity and we understand that the majority are willing to partner with the public services to deliver mental health recovery services that Victorians deserve.

We extend an open invitation to the Commissioners to visit our facility.

## Partnership for recovery

WCPH already has a unique relationship with the public mental health system. Over the past three years we have delivered public mental health services in general adult mental health, youth mental health and alcohol and other drugs (AOD) services.

This partnership has demonstrated how effectively the public and private mental health system can work with patients moving between WCPH and a public hospital based on the need of the patient and the demands on the public health system.

The partnership established between WCPH and Mercy Mental Health has provided the department the opportunity to use the program as a pilot to review and in turn roll out similar productive programs across the state, including Melbourne Health and Monash Health.

## Wyndham Clinic’s government partnerships

WCPH has a service partnership with the Werribee Mercy Hospital (Mercy Mental Health) allowing public patients to receive care in our hospital. This partnership has provided Mercy Health with access to inpatient beds since September 2016, with provision for flexibility when patient demand is excessive at Werribee Mercy and the patients condition is appropriate and that there is capacity at Wyndham Clinic Private Hospital.

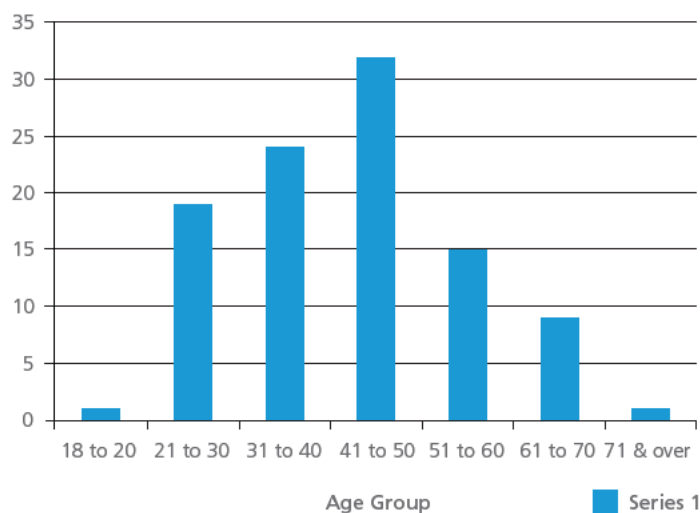


The current agreement provides between two and five public patients, at any one time, access to Wyndham Clinic's private beds and allows those patients access to be engaged in patient centred, recovery focused rehabilitation.

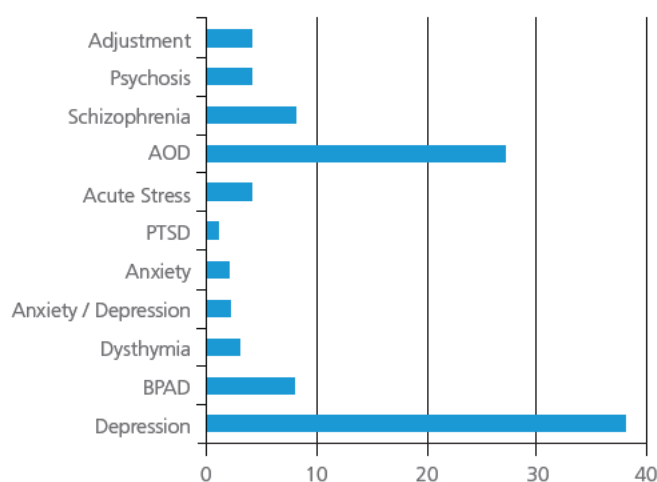
The agreement permits flexible use of beds, depending on demand, and allows Mercy Mental Health to deliver access to treatment options (that would otherwise be unavailable) over the network.

**Figure 2: demographics of patients treated under Werribee Mercy WCPH partnership**

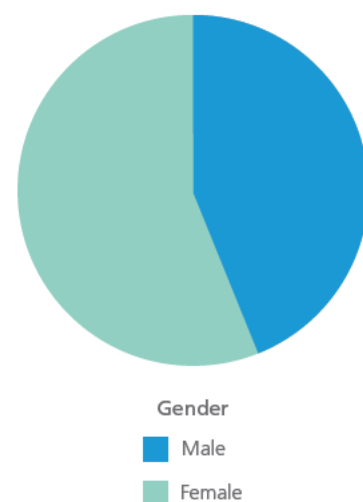
**Table A: Age range of admitted patients**



**Table B: Primary diagnosis at discharge**



**Table C: Gender split of admitted patients**





The partnership has been very successful in supporting public patients on the recovery journey. Our clinic is one of many that could provide immediate recovery support to Victorians in need.

WCPH also has a service partnership with the North West Melbourne Mental Health (NWMMH) allowing youth public patients to receive care in our hospital. This partnership has provided NWMMH with access to inpatient beds since April 2018, with provision for flexibility when patient demand is excessive across the NWMMH network and the patient's condition is appropriate and that there is capacity at Wyndham Clinic Private Hospital.

WCPH also had a service partnership with the Department of Health and Human Services (DHHS) allowing alcohol and other drug (AOD) public patients to receive care in our hospital. This partnership provided DHHS with access to inpatient beds over a short period in 2018 as part of a state wide AOD bed initiative.

**WCPH workforce development**

On establishing our hospital, we experienced difficulty encouraging consultant psychiatrists away from the East Melbourne/Parkville specialist-rich suburbs. Instead of treating this as a barrier, we looked to the opportunity.

Through a targeted recruitment program, we have attracted and retained a skilled workforce who did not come with entrenched views about models of care. Many of our consultant psychiatrists are overseas trained doctors and all were enthusiastic about developing models of care that are right for our community. Most of our treating psychiatrists also work in the public mental health system. We have developed a family like environment in which our clinicians are supportive and knowledge and experience are shared rather than jealously guarded.

**WCPH best practice care model that is safe and person-centred**

Our model of care has been in part outlined above. This should be read in conjunction with the description of our services in Appendix 1. We extend an invitation to the Commissioners to meet with our treating team for a first hand description of our model.





## Conclusion

The lack of availability of facilities in which public mental health patients can recover leads to incomplete recovery, which in many circumstances leads to poor health outcomes and dire consequences. Too often patients are re-admitted because they have been discharged too early (due to system pressures) without the necessary skills and support, they need for recovery.

There is an urgent need for public recovery facilities for patients following acute mental health trauma. The state needs to develop purpose-built recovery facilities so mental health patients who have experienced severe trauma receive the same support as road accident and other physical trauma patients in a 'step down setting' with the necessary therapeutic environment and psychological support.

In the interim, the state should look to private mental health facilities to ensure that Victorian's receive the recovery support they need now.





# Appendix 1 – Introduction to Wyndham Clinic Private Hospital

WCPH – the first dedicated private mental health hospital in Melbourne’s west – provides a choice for consumers for both community-based and inpatient mental health services.

WCPH provides acute inpatient mental health services. Our model of care includes a multi-disciplinary team that provides/addresses the following:

- Individual and group therapy offering psycho-education, skill development and coping strategies. This program is designed to treat a broad range of mental health issues.
- Risk assessment and management.
- Appropriate and geographically convenient mental health inpatient services for a range of mental health issues for referral from local health professionals.
- The presence and support from a large number of GP’s and private psychiatrists.
- Day programs that provide transition from the inpatient program, as well as access for patients that do not require an inpatient stay.
- Adult and aged psychiatry, alcohol and other drug unit and specialist youth mental health services.
- Mental health therapies required by the local community and health organisations in greater Melbourne.
- These services involve referral to community support services, adjustment counselling, skill development and lifestyle and health habits programs. It may also involve assistance for the patient and their family to adjust to changed circumstances or support through a difficult time.

Our facility offers patients and their families a safe, secure, supported and comfortable environment within which treatment, and long-term mental health improvement and recovery can be achieved. While the Clinic offers all the benefits of a new, state of the art facility, the members of our team have had decades of experience at leading mental health facilities. Because we are a smaller hospital, our team can offer that personal touch.

We’re proud to have achieved the following accreditation standards:

- National Standards for Mental Health Services 2010
- AS/NZS ISO 9001-2016 Quality Management Systems
- National Safety and Quality Health Service Standards 2012 (NSHQS)

We currently have 22 credentialed psychiatrists led by our medical director, Kirthi Kumar MBBS DPM DNB FRANZCP. This team of treatment specialists is supported by our director of nursing, together with a full executive management team and nursing staff.



WCPH is a newly completed facility with modern features offering a comfortable environment for patients and their families, whether in an in-patient environment or as part of our day programs. The facilities include:

- Private rooms
- Private bathrooms
- Recreation and specific lounge and dining spaces
- Outdoor recreation facilities
- Specific sensory modulation zones
- Dedicated group therapy facilities
- Outdoor visitors' area
- Visitor disabled parking

WCPH's inpatient mental health services comprises of a total of 50 inpatient beds, divided into three (3) specific and separate treatment units;

- Anembo Unit – 28 bed adult general mental health unit
- Gunyah Unit – 10 bed specialist youth mental health unit
- Illira Unit – 12 bed Alcohol and other drug rehabilitation unit

Each of the three units offered at WCPH offer patient access to specialised therapy programs tailored to deliver high quality interventions to their individual needs. Each of the units offers dedicated spaces to each, including separate lounge, dining and recreation spaces. Each unit offers separate group therapy facilities, Internet lounge, quiet and reading zones as well as specific consulting rooms.

The Clinic's multi-disciplinary health care team provides a high level of inpatient care and treatment. Detailed, holistic assessment is undertaken from pre-admission through to discharge by our experienced clinicians. The model includes individual and group therapy. These programs offer patients peer support, an improved understanding of their illness, abilities and disabilities along with skill development. Therapy sessions include:

- Psycho-education
- Mindfulness
- Developing positive coping strategies
- Relaxation
- Discharge planning
- Community engagement
- Relapse prevention
- Anxiety and depression management
- ECT treatment
- rTMS treatment
- Individual therapy with clinical psychology
- Social Work Support
- Occupational therapy sessions
- Exercise physiology



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