

██████████. ██████████

My brother ██████ had been ill for 30 years with a diagnosis of schizophrenia. He had been generally stable for some time and was working and regularly seeing his psychiatrist. He was receiving monthly medication injections.

█████ mental health declined following the passing of my father. There were some small signs. He initially continued to work but was very up and down and eventually he was hospitalised for 6 weeks.

The psychiatrist that ██████ had been seeing for many years retired and my mother and ██████ felt stuck. The GP was now prescribing his medications; however, my mother and brother were not receiving any other support. The psychiatrist had not referred ██████ to another psychiatrist.

█████ commenced work again and was supported by my mother and immediate family. Over the past 5-6 years ██████ mental health deteriorated quite drastically, and he was admitted to the ██████████ Acute Psychiatric ward. He stayed for some months and was allocated a case manager.

He was receiving care from ██████████ Mental Health Services - ██████████. His case manager would try to get him out socially, for a coffee or walk but he did not want to go and didn't wish to leave the house, unless it was with my mother to attend an appointment. His mental health continued to deteriorate, and he was in and out of both the ██████████ and ██████████ hospital. This was a very difficult period for my mother especially as he would often take off in the middle of the night and she would not know his whereabouts. She also had periods in which she was concerned for her own safety.

█████ last stint at ██████████ Hospital was for 6-7 months, whilst waiting for a bed at ██████████ Community Care Unit (CCU) in ██████████.

During the last year of ██████ life, his medications were titrated and he became somewhat more stable when visiting with family. He was conversing quite well with us. He eventually moved to ██████████ CCU and was sharing a room with another male.

My mother became rather concerned about ██████ residing at the CCU for so long, as we were told it was to be only an interim arrangement and that other residential facilities were to be built in which he could eventually go to live permanently. That did not happen which was frustrating. It was suggested that he go to live in a Supported Residential Service (SRS) in ██████████, however we had heard some stories about that place, and we thought it may be an unsafe environment for ██████.

Towards the last few months of his life, ██████ expressed issues with the male he was sharing his accommodation with at the CCU. This male was constantly asking for money, and he expressed that he did not feel safe living with this man. My family advised staff at the CCU that ██████ did not feel safe living with him and even the male's own mother had passed on her own concerns to the CCU, that her son was not travelling well and was concerned about his behaviour. We were continuously being assured that his mental health was being monitored and that ██████ was safe to continue living with this person. We were debating if we should take ██████ away from there. We really did not have many options.

We received a call on a Thursday night to say that ██████ had been stabbed by this man. ██████ spent 9 days in ICU and after this time his life support was removed. He was alive for another week and a half before he passed away.

Our family was and still is so angry. We discovered later that this male had a history of drug use, and severe paranoia which was obvious to staff. We heard many things in Court regarding his history of paranoia towards my brother. He wasn't moved as a precaution and given the information that they had and from our concerns, he should have been. This man had spent time in [REDACTED] facility, and he was released to live with my brother.

There are so many unanswered questions. We are still awaiting the coroner's report to come and the sentencing of the perpetrator. He is currently in [REDACTED] as a prisoner, not as a patient.

The hardest thing for my family is the guilt that we live with as we couldn't do anything to protect [REDACTED]. We should have tried harder to get him out and we should have listened to my brother's concerns.

We had meetings with the staff at the CCU and we told them of the signs when my brother was becoming unwell. They are trained staff and they didn't recognise this man's deterioration. They should have seen the signs. The morning of the attack on my brother, he was acting in a very paranoid manner. We have so many questions and we are not getting answers.

The CCU has had little communication with my mother and we feel we have been forgotten. They made initial contact and checked in with my mum, but we were all too raw at the time. No one has called to ask how my mother is going. MIND has supported my mother well and check in with her regularly.

The Coronial investigation process is to take years, and nothing can be done until he is sentenced. The Court case has now been put back to December. Originally this man was sent to [REDACTED] and then onto [REDACTED].

Court procedures in this situation are so different to normal procedures. First 3 days went very quickly at the Supreme Court. On the first day a jury found him not guilty due to mental impairment. The following day the same story with a different jury: not guilty under mental impairment.

We have not yet had our Impact Statements heard in Court. It feels as though we are left with nothing and no one who cares about us and my mother. We've been forgotten. Since the loss of my brother, the nightmare continues. I barely sleep 3 hours a night and when I'm walking around, I feel paranoid that someone is behind me. I now feel unsafe. I was recently triggered by the stabbing event in [REDACTED] after seeing it on the news. I completely fell apart and could not stop crying for an entire day.

My mother lives with the guilt. What reassurance do we have that he won't come back to attack my mum, once he is released? He knows where my mum lives. He has no insight regarding his attack on my brother or what he has done. He feels he needed to do what he did to my brother. Even the Court Psychiatrist has remarked how unwell the attacker was at the time and still is.

Counselling has been so helpful. I am so grateful to them. We are receiving counselling support through the Northern Victims Assistance Program. Merri Health is who communicates with us regarding Court procedures and they have a support worker who attends Court hearings with us. This has been so amazing. My counsellor through Merri Health is a great advocate for further sessions. You receive a few sessions initially through Victims Assistance Program (VAP). Then through the Victims of Crime Assistance Tribunal (VOCAT), though application to the solicitor you may get another 20 sessions allocated. You can apply for further sessions through a subsequent report. I only see the counsellor fortnightly. Without this assistance I don't know where I would be

now, or if I would even be here now. More Government funding for these programs is greatly needed to get victims through the worst of times for a longer period.

We had all been to visit [REDACTED] on many occasions at the [REDACTED] Hospital and it's the absolute worst place to visit. You don't want to end up in there. It is so demoralising, other patients roaming around, men and woman together. You walk in and you are scared, families don't feel safe to visit their loved ones. Even trying to find a staff member to let you out of there is difficult.

I have been to see the staff at CCU and they have made a few changes following my recommendations. Better lighting and security, phones in rooms, and checking in with patients more often throughout the day. I did recommend personal emergency duress alarms, but this has not been put in place. They also can't lock themselves in their rooms for safety, which is common for shared housing.

I initially contacted Martin Foley to advise of our experience. We met and talked, and he mentioned the Royal Commission and he put me in touch with Jodie Geissler, CEO.

My family has dealt with so much. My father also experienced paranoia and he passed away from cancer at the age of 66. We also lost 2 of our cousins to suicide. I have also lost friends since my brother died, some people don't know how to approach our situation. You certainly know who your friends are when it comes down to it.

I think the key is training the people who are looking after mentally unwell people. Single accommodation is vital and hospital facilities are currently so poorly resourced and thrown together. This does not promote recovery for vulnerable people.