

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

Organisation Name

N/A

Name

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

"We need to focus on removing the barriers effected individuals face in receiving care for mental health issues. Let's cut straight to what works: early intervention in the form of mixed methods of treatment, focusing on a patient's relationship between their GP and referral to clinical practitioners in Psychology and Psychiatry. Only when we ease access to the services that we know work in treating mental health issues, we will improve the Victorian community's understanding of mental illness, and reduce stigma and discrimination. I'd like to use my experience with clinical depression as an example. Access to services is too prohibitive. How can we possibly say that 10 discounted sessions per year is enough? It can take a dozen sessions to evaluate whether a practitioner is the right fit for a patient. The APS 2018-2019 Recommended Schedule of Fees has set the standard 45 to 60 minute consultation fee at \$251. An 80% discount with a Mental Health Care Plan eases this to around \$50 dollars. However once the MHCP's 10 sessions are exhausted, who is expected to be able to afford continual treatment? We cannot encourage individuals to take control of their mental health if they cannot afford access to the services that actually have the capacity to make a difference."

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?

"Mental healthcare plan focuses on relationship with GP. Provides access to service without penalty to practitioner, encouraging high quality of service. 10 Sessions is not enough. Are we investing enough in GP's understanding of approach to chronic mental illness? Or are we not giving them the resources and training they need to assist in helping patients to get started in treating a mental illness? Relationship between doctors and pharmaceutical industry needs to be called into question. Patients should not be beginning pharmaceutical treatment of mental health issues without concurrent counselling. The experience of mental illness is highly subjective. We should be wary of how we measure efficacy of public awareness campaigns. Focus on role of NPO's in treatment of Mental Illnesses should be called into question. Why do we encourage concerned audience members to contact an NPO before their GP? We need to strengthen and educate individuals on how to seek help through the public health system. We need to channel concerned individuals into effective services as quickly as possible. Access to GP/Psychology/Psychiatry is CRITICAL in early engagement! How can we strengthen this experience for Victorians?"

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

"National dialogue is improving, but in my 10 years attempting to seek treatment clinical depression there has been no practical outcome. Access to services is as expensive as ever, and is as prohibitive as before. Ease access to critical services (GP, Psychological counselling, Psychiatry). Encourage earlier access and treatment of mental health issues through avenues

that work. Promote a better understanding of at risk behaviours from the perspective of the individual. You are at risk of suicide if you don't seek medical help. We need to remove the burden from the peers and family and encourage effected to individuals to understand and identify why they might be at risk, and how they can practically take action against it. Psychiatry in particular needs pressure removed. I'm currently on a 4 month waitlist to see a psychiatrist for 60 minutes at a cost of \$400 (\$224 rebate); a 30 minute follow up session will cost me \$250. Cost is one thing, but access is another. Unfortunately I cannot propose a solution for this, but a 4 month wait is too long for an at risk individual. "

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.

"The experience of mental illness is highly subjective, and being inside of an illness can feel never ending. Worse still it can be transparent, you don't understand what is happening to you until it is too late. If my GP had the training and ability to take charge when the issue was first raised, it would have taken me a lot less time to get on the right path. My ideal experience in treating clinical depression: * Issue is raised with GP * Cost free or cheap session is setup between GP and a clinical psychologist (This is done in collaboration between your specific GP and the next practitioner). * Link is created between the GP and the patient; patient is encouraged to work through them continually in treating the illness, and know who to seek further advice from. * Psychologist encourages a long term vision, including continual invitation for feedback to identify if relationship is not working (This is critical. If relationship with a practitioner is not working, the patient needs to be able to restart their Mental Health Care Plan. Every time I have been at risk it was because I was between a exhausted MHCP and needing to try a new practitioner, I simply wasn't able to continue or begin a new search as I could not afford it) * Patient is encouraged to explore other points of treatment and continually update with a GP * Another individual (potentially non-professional) could be utilised in managing the individuals case At this point there is virtually no link between services. I am essentially relying on my GP's referral for a service they've not used them self. If that service is in turn inappropriate or ineffective, I don't have any recourse through the MHCP to start again until I wait another year."

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

Access to mental health services discriminates based on income and life work balance. Take hospitality workers as an example; we need to ease access to mental health services in Victoria.

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

"Demystifying of mental illness. It took me too long to be technically diagnosed with a mental illness, and even then still I was never encouraged to reach out to family members."

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

"Remuneration is too low. We need a wage that encourages high quality individuals, and demands the same in their standard of work."

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?

Better treatment will lead to improved social and economic participation. What works? Long term management and treatment through tried and trusted avenues.

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?

" Pushing Federal Department of Health to improve access to services through the Mental Health Care Plan. Improving the role and efficacy of a GP in push starting mental healthcare journey Highlighting the efficacy of treatment plans that work, showing effected individuals what it looks like on the other side. Improved access to Psychiatric services, currently they are too scarce and too expensive Seeking a standardised way to have an individual assist in managing a patients journey through the mental health care system "

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

Listen to the people that matter. Effected individuals and practitioners on the front line.

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

"Sometimes things get worse before they get better. But everything has the capacity to get better with hard work! Indeed we must work hard and do better, many people are depending on it now and into the future!"