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

Organisation Name

N/A

Name

Dr Joe Garra

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?

"In patient treatment in is working, but not outpatient. I'll elaborate later"

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.

There are no outpatient or community psychiatric services in psychiatric hospital but the emergency department is still in ?!

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

"lack of access, lack of assistance for us GPs"

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

N/A

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? $\ensuremath{\text{N/A}}$

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

"The major problem I face as a GP in security is accessing public funded care. Through no fault of the staff the Triage phone rings through to message bank and I have to leave a message for the mental health clinician to ring me back. I have no idea when that will happen. I have resorted to sending patients down to seminary emergency department with a letter and they even have trouble contacting the triage service. Years ago there was an excellent community service. For moderately unwell patients I could request a review by the team in my rooms. They would then come back to me with recommendations about ongoing treatment eg medication adjustment, further psychological intervention etc etc. This no longer exists which means we have difficulty with moderately unwell patients. There is no outpatient psychiatric service that we can refer to and many patients are unable to afford private psychiatry. Having Triage answer the phone when I ring as a GP would be an excellent start!!!! Up to a quarter of my consults per day have a mental health component."