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

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

"Every workplace needs to be accountable for the mental health needs of their workers. This includes their hours of work, family circumstances and physical health. When a workplace identifys a worker who is struggling, they need to make the necessary arrangements to care for the well being of their workers, put in place relatable help and action them as soon as practical. Eg Phycologist, sleep specialist, etc Ongoing pressures at work that dont get addressed, puts a lot of stress on the workers. Employers who refuse to see the problem, drive thier employees to their breaking point. And then suicide follows."

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?

"My mother has schizophrenia. She is a paranoid-delusional schizophrenic. She sees and hears things that are not real. I called 000 for help one day. I explained the situation to the 000 call taker. I also expressly informed them that due to my mothers paranoid delusion, she believed the Police were breaking into her house and trying to set her up. After being transferred 6 times, all to different departments - including the CATT team, 12 police cars were sent to my mothers front door, lights and sirens, down a dead end street, where they approached her screaming ""Where's the knife??"" No ambulance. No mental health support. No CATT team. Police then left, as she was not a danger to anyone, including herself. For the last 8 months, I have been trying to get her the help she needs. Her Case Worker and her psychiatrist do NOT talk to each other. She has been admitted to the Mental Health Ward twice since Dec 2018, and numerous trips to hospital in between. No help was offered to myself throughout this whole ordeal. When it finally was, I had to jump through hoops off 10 story buildings to get it. THERE IS NO COMMUNCATION BETWEEN DEPARTMENTS. THERE IS NO COMMUNCATION BETWEEN ANY OF THE TREATING DOCTORS. How can I get myself the right help, when I cant even get my Mum stable on her medication that the doctors like to change every 3 weeks without consultation??"

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

"Suicide Prevention Day should have a workplace survey. Every workplace is to give all employees the survey. Every survey is scored. Those showing moderate to high risk of suicide should be referred to relevant practioners for treatment. Employers are to maintain contact and follow up on issues that arrise. Privacy issues also taken into account. All workplaces should have a Medical Expert behind the scenes to help diagnose and treat issues. Workplace bullying by Employers also needs to be addressed, especially to those with Medical/Mental Issues. Just because the ailment is not physical, doesn't mean it ISN'T THERE."

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.

"Access to Public Mental Health services is disgusting. When departments dont/wont talk to each other, how can someone with multiple medical issues be properly looked after?"

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

"Mental disorders such as schizophrenia and bipolar get shunned away. Again, because its not physical, it doesnt matter as much. Respite centers dont exist because they are at capacity. The concerns of the family are ignored in regards to treatment and medication. There is no COMMUNCATION. EVER."

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

"COMMUNCATION COMMUNCATION COMMUNCATION Easy access for family and carers. Long term access for families with life-long conditions. Schizophrenia cannot be cured. Only managed. Support from the hospital ended 14 days after my mother was discharged. I am once again alone, unless I look for 6 hours on the Internet to find the help I need."

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

"COMMUNCATION COMMUNCATION More funding for Mental Health respite centers for Mental health conditions Ex. Drug rehabilitation Mental disorders such as -Biploar -Schizophrenia PTSD/Anxiety/Depression A Mental Health Ward is place for these people. Its basically a jail where they drug them up and ""keep them safe"". There is no one-on-one counseling. There are very limited group sessions. There is nothing practical for them to do. Nothing to look forward too. No activities to keep them occupied. They just sit there dazed and drugged, trying to find a way to have a cigarette without getting caught. "

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?

"Animal therapy is a great start - horses, dogs, farm work/stays. Boot Camps Change of environment with a change for mind. Take them out of the environment they are in, retune them and slowly re-enter back to normal duites and situations. Community work - planting tress and shrubs. Maintaining children's playground equipment. Work that makes them feel worthwhile and part of the community is a must. They must be able to feel proud of the job they did."

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?

"Emergency Response from 000 to Mental Health related calls COMMUNCATION COMMUNCATION Medical System Linkage -Chemists -Hospitals -Local GP's -Treating Doctors -Specialists -Community Health - Case workers -Blood Bank #All on 1 system, in one place, access for all Medical Professionals and Patients(Bigger and better than MyGov) Psychiatric Triage Service Overhaul -Currently, the only option for family and operators, is to send an ambulance or take them to Emergency. If the patient is NOT on a Community Treatment Order, and the patient does NOT want help, legally, Ambulance staff and Emergency departments can do

NOTHING, unless duty of care is involved. My mother is delusional and paranoid. She's not acting crazy, she's talking crazy. This is apparently not enough to be taken seriously and get the help required. Workplace Mental Health Employers Duty of Care and OH&S responsibilities surrounding Mental Health Suicide Prevention at the Workplace"

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

"Immediately funding and building Respite Centers for Mental Health. Medical Professionals to COMMUNICATE between departments, to ensure the correct treatment of ongoing medications and care for both patient and family/carers. Linkage of Medical Systems throughout Medical Industry Workplace Suicide Prevention Survey."

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

"COMMUNCATION is non exsistant. The 4 treating doctors for my Mother - Phycologist - Psychiatrist - Local GP - Case Worker. Every time I go with my Mum to see them, I have to update each and every one on what has happened. Every single individual visit. I become mentally and physically exhausted after every appointment, due to repeating myself all day. This is ridiculous. How is the Medical System not linked to each other like VicRoads?? How am I supposed to get my Mother better when the process of getting help, is making myself Mentally unwell?"