

Mental Health Royal Commission Submission

Case Study

- [REDACTED] is a male in his [REDACTED]
- Long term homelessness and rough sleeping
- Behaviour has resulting in banning from community services, housing services, medical services, drop in services and accommodation

Organisations involved

- Port Phillip Community Group
- City of Port Phillip
- Launch Housing
- St Kilda Legal Service
- Eastern Regions Mental Health Association (ERMHA)
- 101 The Engagement Hub
- Alfred Psychiatry
- Australian Community Support Organisation (ACSO) ReStart program
- DHHS Multiple & Complex Needs Initiative
- Sacred Heart Mission
- Salvation Army
- National Disability Insurance Scheme (NDIS)
- State Trustees
- Victoria Police

Presentation

- Lack of clarity around various diagnoses including Schizophrenia and Low IQ
- Poor Hygiene
- Lack of impulse control
- Abusive and unpredictable behaviours
- Drug and alcohol use is apparent
- Easily frustrated and labile

[REDACTED] is well known to City of Port Phillip services and community members. He has a long history of behaving inappropriately and at times, dangerously, resulting in temporary and permanent bans being imposed to ensure the safety of workers and residents.

He has been offered numerous housing options including almost 2 years in a rooming house which was supported by daily home visits by Launch (MSTH). Despite this support, [REDACTED] behaviour resulted in eviction due to his threatening and belligerent behaviours.

Whilst [REDACTED] has received long term depot medication, several workers have questioned whether his diagnoses and medication are correct. He has also been moved on from regular street locations such as a ledge behind the [REDACTED] where [REDACTED] regularly slept when he didn't have accommodation.

[REDACTED] was last released from [REDACTED] in [REDACTED] on a Sunday when no support services were available. He was offered five days of emergency accommodation and returned to rough sleeping on completion. His demeanor and appearance deteriorated drastically within 48 hours of being back on the streets.

Despite numerous organisations being involved in the case management and housing needs of [REDACTED], wraparound services including accommodation and regular and ongoing mental health support has not been put in place. In the absence of such service, there is an expectation that he will continue to cycle through placements, sleeping rough, assessments and remand. He is currently back in remand and there appears to be no mental health services in place to support his imminent release.