



Information for Family and Carers



What is recovery?

For many people, the concept of recovery is about staying in control of their life despite experiencing mental ill health.

Professionals in the mental health sector often refer to the ‘recovery model’ or recovery oriented services, to describe this way of thinking.

Putting recovery into action means focusing care on supporting recovery. To build the resilience of, and empower people with mental ill health, not just treat or manage their symptoms.

There is no single definition of the concept of recovery for people with mental ill health, but the guiding principle is hope – the belief that it is possible for someone to regain a meaningful life, despite serious mental illness.

Recovery is often referred to as a journey of discovery, an outlook, a set of guiding principles.

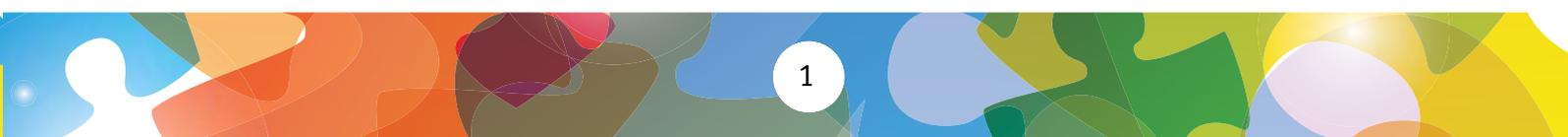




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Quick Reference Guide

Who to call in an Emergency:

Name:

Phone:

Ward / Clinic Phone Number:

Who else can assist:

Mental Health Clinician:

Phone/Email:

Treating Doctor / Consultant:

Phone/Email:

General Practitioner:

Phone/Email:

Important Numbers

Access information and assistance in times of mental health crisis 24 hours a day



In an emergency call: 000

24 HOUR / HELPLINE PHONE NUMBERS

Lifeline	131114
Domestic Violence Hotline	1800 811 811
Child and Youth Mental Health	3068 2555
Kids Helpline	1800 551 800
Alcohol & Drug Info Service	1800 177 833
Salvo Care Line	3831 9016
Arafmi Hotline	3254 1881
Carers Qld	3524 1700
Non urgent medical issues	13 Health (13 43 25 84)





Introduction

We acknowledge the significant contribution that families, carers and significant others make in supporting a person with mental ill health on their recovery journey and we promote your involvement in their care planning and treatment.

The information in this booklet is provided to help you understand the journey of someone you care about through our mental health service. For many families, carers and significant others this is a stressful and confusing time.

We hope the information in this booklet will alleviate some of your concerns. We value your participation in the treatment and recovery of the person you care about, and you are always welcome to speak to the treating clinicians.

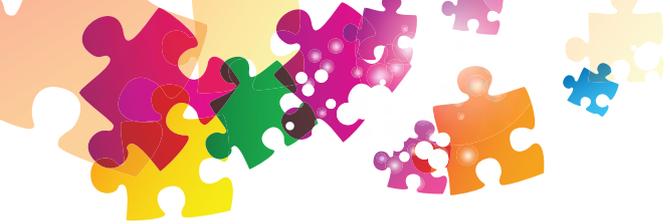
The booklet also contains contact information for community organisations and other agencies that you may find useful.

Our service aims to improve the quality of life of people with mental disorders and mental health problems through high quality consumer and carer focused services, teaching and research, and by providing leadership and excellence in health care.

We wish you well as you support the person you care about through their recovery journey.

Approved by,
Assoc. Prof. Brett Emmerson, Executive Director, Metro North Mental Health

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Review date: November 2016



About this booklet

All the information in this booklet is generic. More specific information on each of the facilities within Metro North Mental Health can be obtained through the contact details below.

This booklet contains many links and references to online electronic information. If you would like to access the links electronically please contact us via the email address below to request a PDF version of the booklet.

Note: The information references in this booklet are current as at the date of publication but they may be subject to change.

Metro North Mental Health Consumer and Carer Services can provide hard copies of a range fact sheets and brochures, simply contact us on the following numbers or email address:

Metro North Mental Health Consumer and Carer Services

- Redcliffe and Caboolture Hospitals: 07 5433 8775
- The Prince Charles Hospital: 07 3139 4561
- Royal Brisbane and Women's Hospital: 07 3114 0803

Email: mnmh.consumer.carer.services@health.qld.gov.au

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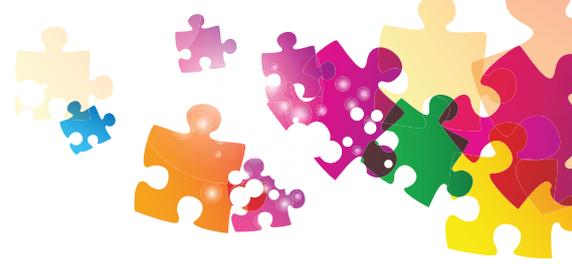
This consumer information booklet supports a number of the National Safety and Quality Health Service Standards including;



Partnering with Consumers - Standard 2 (2.4.1) - Consumers and / or Carers provided feedback on this publication.



Recognising and Responding to Clinical Deterioration in Acute Health Care – Standard 9 (9.9) – Enabling patients, families and carers to initiate an escalation of care response.



Who is a carer?

A carer is a person who, without being paid, provides ongoing care or support to another person who requires assistance with everyday tasks because of a long-term medical condition, a mental ill health and / or substance use issue, a disability, frailty or the need for palliative care.

Carers may be parents, partners, children, siblings, extended family members and/or friends. Carers can be all ages, come from all walks of life, and come from different cultural backgrounds.

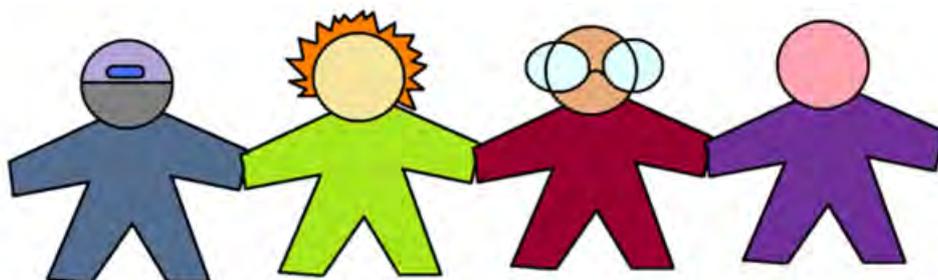
Caring for others can be complex and demanding, and each person's experience of caring is likely to be different. Carers may or may not live with the person. They may care for a few hours a week or all day, every day.

A carer may require assistance in a range of ways to ensure their own health and wellbeing. A carer's experience may be enhanced by the provision of information, support, respite, education, training or counselling.

Who is a consumer?

The term Consumer is used within the public Mental Health Service to describe the person who is accessing treatment within the service.

There may also be times where the person is referred to as the service user, patient, inpatient or client.





Recovery
is not only
possible it is
probable

How can you support recovery?

Look for **hope**
in even the smallest achievements
and maintain a sense of hope.

Focus on the **positives.**

Promote **empowering**
relationships based on
trust, empathy and **respect.**

Encourage and practice
self-determination and self
learning

Work in equal **partnership**
with the person you care about
and the team of service providers
responsible for their treatment.

Listen, **just listen.**

LISTEN

When I ask you to listen to me
And you start giving me advice,
You have not done what I asked.
When I ask you to listen to me
And you begin to tell me 'why' I shouldn't feel that way,
You are trampling on my feelings.
When I ask you to listen to me
And you feel you have to do something to solve my
problems,
You have failed me, strange as that may seem.
Listen! All I ask is that you listen:
Not talk, nor do – just hear me.
And I can do for myself – I'm not helpless
Maybe discouraged and faltering, but not helpless.
When you do something for me, that I can
and need to do for myself,
You contribute to my fear and weakness.
But when you accept as a simple fact that I do feel what
I feel,
No matter how irrational
Then I quit trying to convince you
And can get about the business of understanding
What's behind this irrational feeling.
When that's clear,
The answers are obvious and I don't need advice.
Irrational feelings make sense when we
understand what's behind them.
Perhaps that's why prayer works sometimes for
some people:
because God is mute, and doesn't give
advice to try to 'fix' things,
He/She just listens, and lets you work it out
for yourself.
So please listen, and just hear me, and if you
want to talk,
Wait a minute for your turn,
And I'll listen to you.
Anon.

This poem was written by a mental health consumer who was institutionalised over a number of years in Queensland. He wishes to remain anonymous.



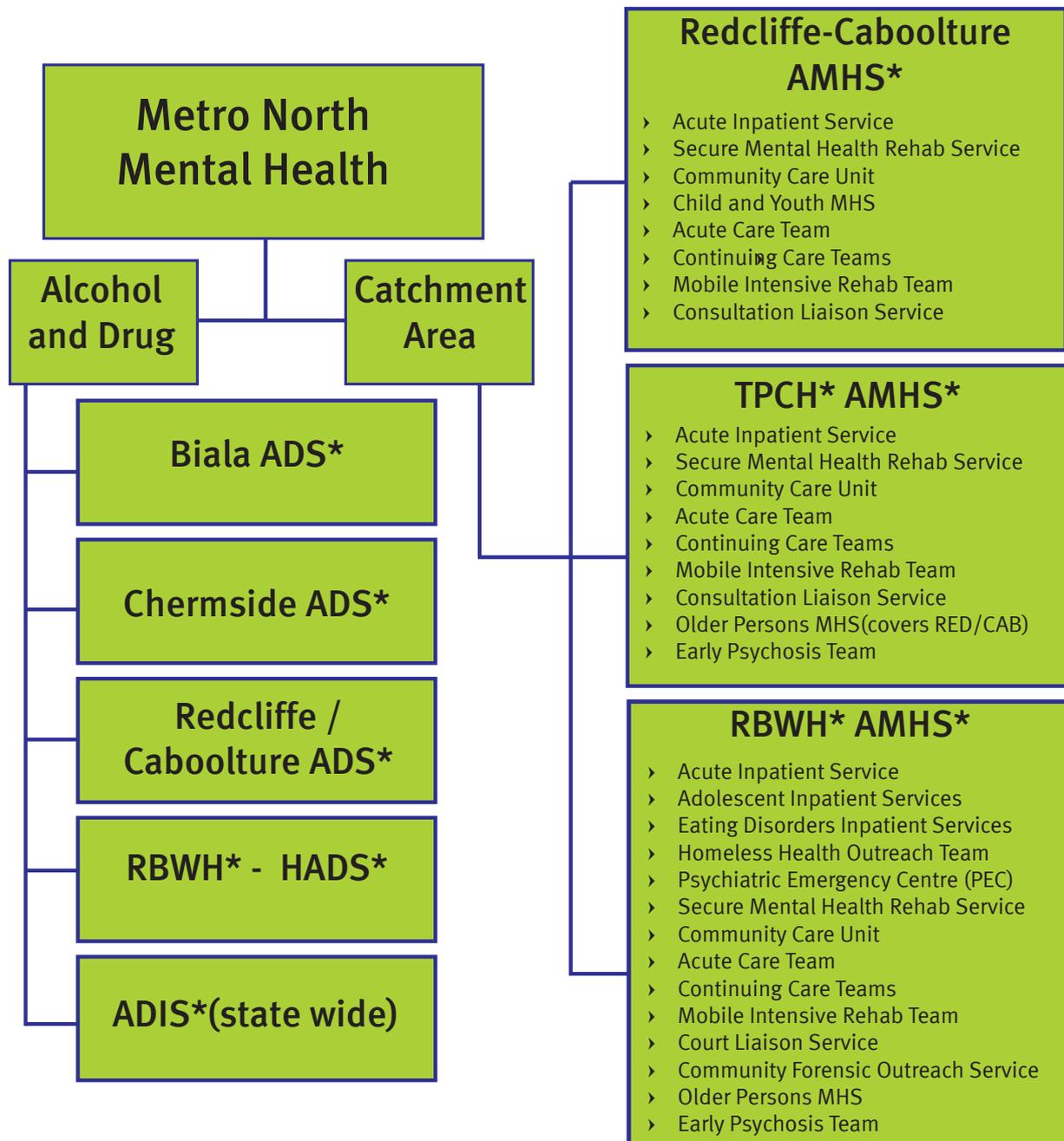


Navigating the Service

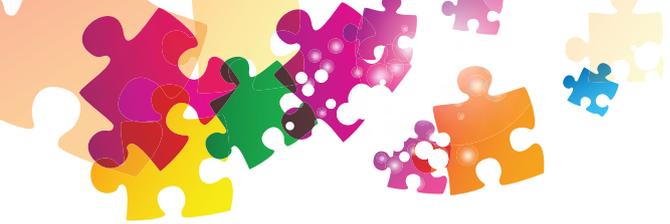
Metro North Mental Health (MNMH) provides acute assessment and treatment services to people with serious mental health problems and substance use issues residing in the defined catchment areas of the inner and northern suburbs of Brisbane, Redcliffe, Caboolture and Kilcoy.

More information about navigating MNMH public hospital and community care services can be found on line at the following web page:

<http://www.mymentalhealth.org.au/page/services/public-hospital-and-community-care/>



* Refer to Glossary on Page 31



Navigating the service ...

The diagram demonstrates that acute treatment services are made up of varying aspects. Some services are available during working hours, and other services are available 24 hours a day, 365 days. Some services are accessed on referral, and others are available to all people with mental health concerns.

Depending on individual circumstances a person may need to be admitted to hospital. Other people may be okay with getting treatment and support in the community from public mental health services, private mental health practitioners, other community services or their General Practitioner.

Acute Care Team

You can access the Acute Care Team at any time without a referral. They provide assessment, triage and interim case management.

Tip:
Ask when you
can attend ward
rounds

Acute Inpatient Services

When admitted to hospital the person you care about will receive the necessary treatment in an environment where they are safe and have access to specialist staff. The Doctor may prescribe medication as part of their treatment. The need to monitor the patients progress and medication can be a determining factor in the length of stay. Inpatients are continually assessed and the treating team have a weekly 'ward rounds' meeting with them to discuss their care and treatment progress. The treating team will begin discharge planning almost as soon as the person is admitted to ensure appropriate supports are in place on discharge.

Tip: You can be involved. Nominate a
primary person for the service to contact

Continuing Care Teams

There are community-based services at Fortitude Valley, Herston, Rosemount, Aspley, Cherside, Pine Rivers, Nundah, Caboolture and Redcliffe with outreach services to Kilcoy. MNMH provides services across the age spectrum from perinatal, child and adolescent, adult to older persons as well as a range of specialist services including consultation liaison, forensic, addiction, eating disorders and community mental health, including an inner city Homeless Team. All of these are Multi Disciplinary Teams (MDT) that provide extended mental health care services in the hospital and in the community. Within the MDT a doctor and a Mental Health Clinician are identified as the primary supports for the person. Wherever possible the aim is to promote the person's level of independence while supporting them to work toward their recovery goals. The person you care about will need to attend the Community Clinic and some home visits may be possible. The Mental Health Clinicians can also provide support regarding accommodation and links with other services.



Navigating the service ...

Who can assist in inpatient services?

On each shift the **Senior Nurse** co-ordinates the treating team for nursing.

A **Nurse** is assigned a small group of inpatients. The nurse will give medication when needed and continually assess their mental health. The nurse can provide support to patients and family during their stay.

The **Nurse Unit Manager (NUM)** is responsible for co-ordinating the nursing staff and the inpatient care on the ward.

The **Psychiatric Registrar** is responsible for day to day assessment and management of inpatient care.

A **Resident Medical Officer (RMO)** primarily manages the physical health of inpatients and also contributes to mental health assessments as part of their training.

The **Consultant Psychiatrist** is responsible for making or approving all treatment decisions for an inpatient.

An inpatient **Social Worker** can provide support and assistance with a range of practical and emotional issues. Social Workers are available to work with patients, their families and carers.

Some services have a **Discharge Facilitator** who provides brief intensive support upon discharge when an inpatient does not need to be linked into the Community Mental Health Teams.

The roles above may be collectively referred to as the **Treating Team**.

Consumer Companions are health workers with a lived experience of mental ill health. They provide companionship for inpatients, positive role modelling and living proof that recovery is possible.

Administration Officers located in the reception area of the ward can also assist with enquiries.

Some services are teaching facilities; there may be times when Mental Health Professionals are accompanied by a **Student**.

Note: Staffing and titles may vary across sites.

What is a Mental Health Professional?

Mental Health Clinician:

Nurse,
Social Worker,
Occupational Therapist,
Psychologist

Doctor:

Resident Medical Officer (RMO),
Psychiatric Registrar,
Consultant Psychiatrist

Tip:
Ask - 'Who is our key contact person? -

What is the best way for me to contact them? -

What is the best time for me to contact them?'

What is a multidisciplinary team?

These are teams of mental health professionals with differing but complementary skills working together to promote holistic care and enhance continuity of care.

The skill range of a multidisciplinary team better meets the needs of consumers with complex needs. In addition to these teams there are non-clinical positions which provide further support to the consumer and family or carer. They include: Indigenous Mental Health Worker, Consumer Consultant, Carer Consultant and Recovery Support Worker.



Talk about plans

The treatment planning process begins on admission / service entry, and discharge planning begins soon after. Ideally all aspects of planning are developed collaboratively between the consumer, the Mental Health Clinician and or the Treating Team with the aim to promote individual recovery needs.

Recovery Plan

This plan focuses on the person's recovery goals, their hopes, dreams and what they want to achieve in the short and long term future. The Mental Health Clinician and the treating team will work with the consumer to develop a Recovery Plan. The plan is regularly reviewed and will assist the treating team to include the person's recovery needs as an important part of their treatment and care planning.

Tip:
planning input from family and significant others is welcome and helpful.

Individual Care Plan / Treatment Plan

Is developed by the treating doctor and or the treating team and sets the direct for treatment and care. The plan identifies issues and sets objectives on how the service will assist the person you care about reach these goals. For involuntary consumers, when completed in full, this plan meets the requirements of the Mental Health Act 2000.

Acute Management Plan

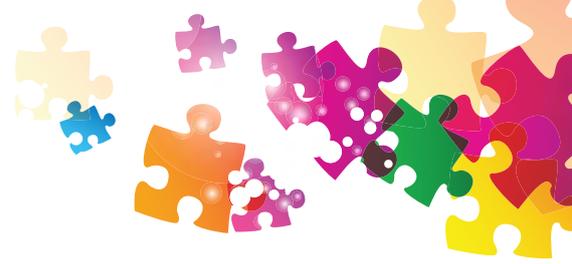
A AMP is most useful for a person with a mental illness who presents frequently to the Department of Emergency Medicines and or the Mental Health Acute Treatment services. The AMP provides timely clinical information to doctors and clinicians such as indicators for admission/discharge, risks and triggers, and what interventions are helpful.

Crisis Intervention Plan

A Crisis Intervention Plan is most useful for someone with mental ill health who has a history involving crisis contact with the Queensland Police Service (QPS) or is at high risk of harm to self, others or property. The CIP is designed to describe someones behaviour when in crisis in the community and what interventions the police can use to facilitate a safe resolution for all people involved. The CIP is ideally developed collaboratively between the person, carers, QPS, the treating team and the Mental Health Intervention Co-ordinator. In addition other services such as the Queensland Ambulance Service (QAS) often support the police to help a person in crisis.

Tip:
Ask what programs are available to support recovery
eg. Wellness Action Recovery Plan (WRAP).





Mental Health Legislation

Note: Prior to the publication of this booklet, a review of The Mental Health Act 2000 was underway. We advise you seek further advice on current information.

The Mental Health Act 2000 provides for the **involuntary** assessment and treatment, and the protection, of persons with mental ill health. At the same time, the Act aims to safeguard and balance the rights and freedoms of people who have a mental illness and those of others.

Involuntary Assessment

The purpose of involuntary assessment is to determine if the person requires treatment for mental illness. The assessment is made by an authorised doctor.

Tip:

Ask for more information about the Mental Health Review Tribunal or speak to a Mental Health Act delegate;

RED CAB: 07 5316 5694

TPCH: 07 3139 4617

RBWH: 07 3646 1152

Involuntary Treatment

Treatment for mental illness without the persons consent.

Involuntary Treatment Order (ITO)

- a treatment criteria applies
- must be authorised and confirmed by a psychiatrist
- treatment can be inpatient or community according to the persons needs
- remains in place for as long as treatment is required
- regular reviews by the psychiatrist in accordance with the treatment plan
- regular reviews are made by the Mental Health Review Tribunal
- Legal aid is available and there is an appeals process

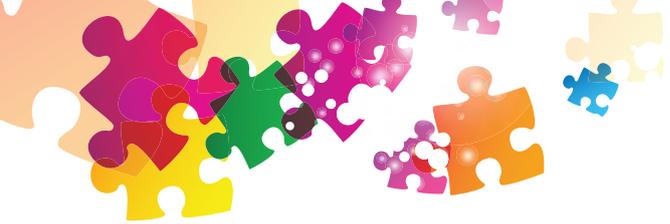
We encouraged you to seek more information regarding Queensland's mental health legislation and the Mental Health Review Tribunal. The following websites may be helpful:

Mental Health Act 2000: <https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/clinical-staff/mental-health/act/default.asp>

Mental Health Review Tribunal: <http://www.mhrt.qld.gov.au/>

Legal Aid Queensland: <http://www.legalaid.qld.gov.au/Pages/Home.aspx>

Queensland Forensic Mental Health: <http://www.health.qld.gov.au/forensicmentalhealth/>



Adult Guardianship, Financial Administrator and Legal Matters

In Queensland under a framework of human rights protection independent statutory bodies such as The Public Guardian have a role in relation to protecting the rights and interests of vulnerable adults who don't have capacity to make some or all of their own decisions due to an illness or disability.

Consent and Capacity

Substitute decision makers for people with impaired decision making capacity in order of priority:

1. Advanced Healthcare Directive (AHD)
2. QCAT or Guardian appointed by Qld Civil & Administrative Tribunal (QCAT)
3. Attorney under AHD or Enduring Power of Attorney (post 1998)
4. Statutory Health Attorney:
 - Spouse (if relationship is close/continuing),
 - Adult's carer if over 18 and not a paid carer,
 - Close friend or relation if over 18 and not a paid carer
 - Note: for carer or close friend/relation they must be readily available and culturally appropriate
5. The Public Guardian

If there is a dispute between statutory health attorneys OR if a decision of a substitute decision maker is inconsistent with good medical practice the Mental Health Practitioner may call The Public Guardian.

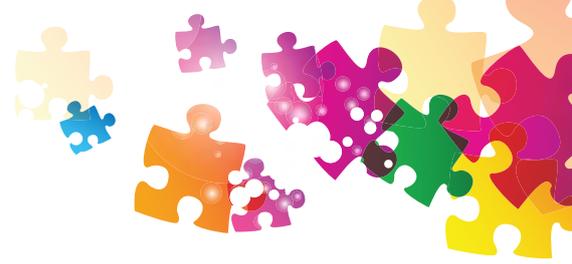
Information regarding legal, administrative and guardianship services for people with decision making impairment can be accessed at the following website links:

The Public Guardian: <http://www.publicguardian.qld.gov.au/adult-guardian>

The Public Trustee: <http://www.pt.qld.gov.au/services/>

Queensland Civil and Administrative Tribunal (QCAT): <http://www.qcat.qld.gov.au/>

Legal Aid Queensland: <http://www.legalaid.qld.gov.au/Pages/Home.aspx>



Child and Youth, Older Persons and Forensic

The information in this booklet is directed at the family, carers and significant others of Adult Mental Health Service consumers.

Information relating to child and youth, older person and forensics can be found at the following web pages:

Child and Youth Mental Health Service (CYMHS): <https://www.childrens.health.qld.gov.au/mental-health/>
Queensland Forensic Mental Health: <http://www.health.qld.gov.au/forensicmentalhealth/>
Older Persons Mental Health Service: <https://www.health.qld.gov.au/rbwh/services/mh-services.asp>

Healthcare Rights and Expectations

Everyone who uses the Australian healthcare system has certain rights. These rights are outlined in the Australian Charter of Healthcare Rights. Consumers, families, carers and service providers can work together to get the best healthcare possible if these rights are understood.

You are encouraged to read the charter or have it explained to you and or the person with mental ill health. If you feel your rights or the rights of the consumer have not been respected, or you have concerns about their healthcare let us know as soon as possible. Refer to the section entitled 'Let us know what you think' (Page 27).

A staff member can assist you to obtain information about healthcare rights or you can access more information on line at the following links:

Mental health statement of rights and responsibilities:

[http://www.health.gov.au/internet/mhsc/publishing.nsf/Content/8F44E16A905D0537CA257B330073084D/\\$File/rights.pdf](http://www.health.gov.au/internet/mhsc/publishing.nsf/Content/8F44E16A905D0537CA257B330073084D/$File/rights.pdf)

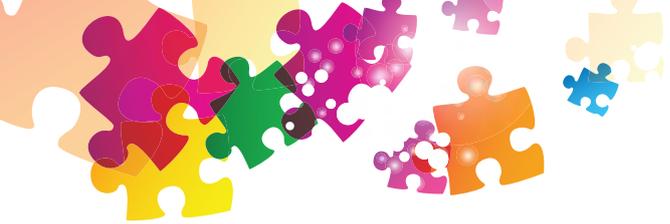
Australian Charter of Health Care Rights PDF or audio versions, in several different languages on the Australian Commission on Safety and Quality in Healthcare:

<http://www.safetyandquality.gov.au/national-priorities/charter-of-healthcare-rights/>

Involuntary patients

have the same rights as any other patients with some further conditions. For more information, please refer to the brochure: Statement of Rights for Involuntary Patients or visit the web site at the following link:

[https://www.health.gov.au/internet/main/publishing.nsf/Content/E39137B3C170F93ECA257CBC007CFC8C/\\$File/rights2.p](https://www.health.gov.au/internet/main/publishing.nsf/Content/E39137B3C170F93ECA257CBC007CFC8C/$File/rights2.p)



Health Standards

Metro North Mental Health is evaluated on an ongoing basis through various accrediting bodies. The Australian Council on Healthcare Standards (ACHS) is the external organisation Australia wide accreditation body under which all areas of the organisation are evaluated.

The ACHS Evaluation and Quality Improvement Program (EQuIP) involves establishing accountability mechanisms that will assist health services to demonstrate standards and outcomes and help focus the health service on providing quality care and services.

The National Safety and Quality Health Service Standards provide a nationally consistent statement of the level of care consumers should be able to expect from health services. The primary aim of the National Safety and Quality Health Service (NSQHS) Standards are to protect the public from harm and to improve the quality of health service provision.

The National Standards for Mental Health Services (the standards) were introduced in 1996 and updated in 2010 and to assist in the development and implementation of appropriate practices and guide continuous quality improvement in mental health services. The standards are now very influential in how services respond to the needs and expectations of consumers and carers.

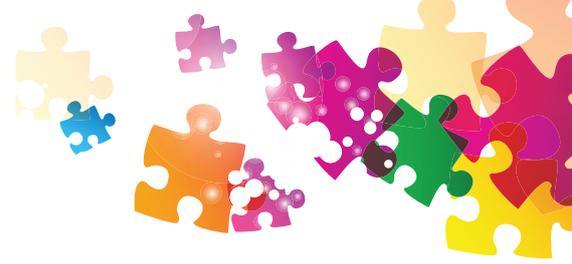
Electronic copies of the NSQHS and the National Standards for Mental Health Services are available at the link below:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-pubs-n-servst10>

Diagnosis

As a family member or carer, you will want to know exactly what you're dealing with so you can provide the best support. However, be aware that getting a definite diagnosis of a mental health disorder can be difficult. Initial diagnoses may change over time because a diagnosis is made by recording symptoms and a medical history, and this takes time. A mental health diagnosis is usually made by a Mental Health Professional.

You are encouraged to assist by describing your experience of the person's illness, and sharing information about what they are like when they are well. If the person you care about does not agree with their initial diagnosis, they can get a second opinion.



What is mental health?

Mental health means having a sense of wellbeing, enjoying positive relationships with others and being able to cope with the inevitable ups and downs of life. Mental health problems are disturbances in a person's mental state or wellbeing.

A mental health problem may be short-term or ongoing. Short-term problems may occur when there is a stressful event or circumstance. The problem may interfere with a person's ability to relate to others, to work, or enjoy leisure time and cope with everyday living, but to a lesser extent than a mental illness.

What is Mental Illness?

Mental illness is a significant disturbance of thought, mood, perception or memory. The term 'mental illness' refers to a group of illnesses (sometimes called mental health disorders) with various symptoms, behaviours and degrees of severity. A person may experience periods of wellness followed by periods of illness and disability.

Mental illness affects one in five people during their lifetime. The most common mental illnesses are anxiety and depressive disorders. Some other major types of Mental Illness include Schizophrenia, Bipolar Affective Disorder, Personality Disorders and Eating Disorders.

Psychosis may occur during an acute episode of Schizophrenia or Bipolar Affective Disorder. People experiencing an acute episode may lose touch with reality and perceive their world differently than you would typically expect. Psychotic episodes can be threatening and confusing to other people. Such behaviour is difficult to understand for people who are not familiar with it.

One of the biggest obstacles for people recovering from mental illness is confronting the negative attitudes of other people. These often mean that people with mental illness face isolation and discrimination just for having an illness.

Positive and hopeful attitudes of family, friends, service providers, employers and other members of the community toward people with mental illness are critical to ensuring quality of life for people with mental illness and supporting recovery.

More information about mental illness and what can be done about the stigma of mental illness can be found at:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-pubs#W>



Medication

Medication is often prescribed to help a person diagnosed with mental illness manage their symptoms.

Having a clear knowledge and understanding of the illness itself, the medication prescribed, how to take the medication, the possible side effects of the medication and how to manage the side effects will assist a person to achieve greater personal control over the symptoms they experience.

For more information about medication visit the Queensland Government Choice and Medication website:
<http://www.choiceandmedication.org/queenslandhealth/>

Tip:
If you have concerns about how the medication manages the illness symptoms, or the medication side effects the person may be experiencing, talk to your treating team contact person as soon as possible.

Mental illness and alcohol and / or substance use

The term Dual Diagnosis is used to describe someone with two or more disorders or problems, one of which is a mental illness and one of which relates to the use of alcohol and / or other drugs.

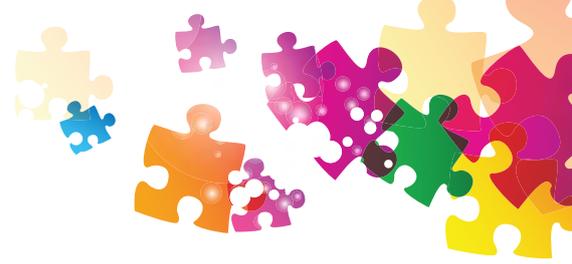
If you think that the person you care about is using or abusing alcohol or illicit drugs, it is likely that you will be concerned that he or she may be harmed, may harm themselves, or may do something illegal, and you will no doubt be concerned that their mental illness will worsen.

Whilst you may not be able to stop someone using alcohol and drugs, you are able to minimise harm, and help them through this very difficult part of their life, by using some well-known and well-tested strategies.

You can begin by talking to the doctor or treating team of the person you care about. You have a wealth of information they will find useful to identify the best treatment options. They can help you understand how you can best support the person on their journey toward recovery.

Additional information can be found on the Queensland Health Biala City Community Health Centre website at the following link:

https://www.health.qld.gov.au/services/metronorth/metronorth_biala_chc.asp



Information sharing, privacy and confidentiality

We actively encourage your involvement. Sharing information is significant in recovery from mental ill health. The service acknowledges the need for families, carers, and significant others to work together to develop useful and practical supports for a person with mental ill health. Your input and insights are valuable, what you tell us will assist in targeting the person's individual needs and identify relapse signs so mental health professionals can work with the person to intervene early.

Tips for sharing information:

- **Talk with the person you care about and have an arrangement with them that it is okay for you to be kept informed.**
- **Discuss and agree about what you can and not be informed of, and or discuss with the mental health professionals.**
- **If necessary you can ask doctors / clinicians not to disclose the information you have provided to the person you care about.**
- **Discuss your involvement in ward rounds, discharge planning and other relevant planning (refer page 10). With the person you care about and the mental health professionals.**

The laws of confidentiality are there to help and protect consumers who, because they are unwell, may be extremely vulnerable. The fact that a person can tell a doctor / clinician anything in confidence is the basis of the trust that's needed between the consumer and a mental health professional.

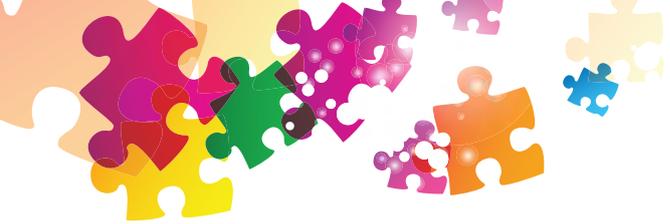
Mental health professionals are limited as to how much information they can share with anyone, including family, carers and significant others without the consent of the patient.

We will endeavour to provide you with information to assist in your understanding about how you can best support the person you care about.

There are also times when mental health professionals are required or allowed to report certain information by law, for example, to keep the person or others safe.

Further information is available in the guideline for information sharing between mental health workers, consumers, carers, family and significant others.

https://www.health.qld.gov.au/publications/clinical-practice/guidelines-procedures/clinical-staff/mental-health/guidelines/info_sharing.pdf



Working with mental health professionals

Understanding how to communicate in the health system can help assist you and the person you care about get their needs met.

When you are feeling stressed and overwhelmed, communicating can be hard. You may not be able to communicate the way you normally would. It can be difficult to feel calm, confident and to know what to ask. Or you may have lots of questions about mental illness as well as questions about your role in supporting the person's recovery.

Communicating with health professionals can be frustrating and confusing. Health workers can be very busy and often only have time for very brief discussions, they may use terms you are not familiar with and they may talk quickly and/or they may not find out if you understand what they're saying.

You are entitled to be treated respectfully at all times. Staff should be responding to your needs with support and encouragement. There can be no excuses for rudeness or disrespect. To let us know about both positive and negative experiences with staff, refer to the '*We need your feedback...*' section of this booklet.

Tips for communicating with mental health professionals:

- Mutual respect is essential for healthy communication. It is not helpful to be threatening or aggressive. You should always respect the rights of staff.
- Try to remain calm and objective, even if you don't feel that way. If the way you are feeling is making it difficult to communicate, try to honestly tell this to the clinician /doctor. Don't be afraid to ask for a moment to collect your thoughts if you need to.
- Ask for information in words you can understand. Ask to have unfamiliar terms or the medication name written down for you. This means you can find out more information on your own.
- If you feel you are not being heard it makes it hard to remain confident. If you feel like this, tell the person. You could say 'I feel I am not being heard...'
- Talking openly is important. It will lead to a better understanding of your situation and that of the person you care about. It gives you an opportunity to talk about your needs and concerns.
- The best way to work out your questions is to spend some time thinking about what concerns / issues / information is most important. Make a list of questions and record the answers. This guide has a list of suggested family / carers questions to help you think about questions to ask.
- Agree on the best way for you to keep in contact e.g. email, phone, appointment
- You may need to talk about your concerns / issues / information a number of times. It may be helpful to write it down and keep it on hand.



Caring for you

Mental ill health presents unique and often highly stressful challenges. We recognise that you have your own specific needs that are separate from the needs of the person with mental ill health. You will need to accept that, in some ways, your life has changed.

Everyone's experience is unique, although it is common for family members and carers to experience a range of emotions including uncertainty, blame, isolation, guilt, fear and grief. Be mindful of how you are thinking and feeling. If you are struggling or have any concerns about your own wellbeing, seek assistance straight away, do not put it off. Booking a long appointment with your GP is a good way to start.

It is important to recognise when you have stepped into a caring role. You may find it helpful to try to separate your role as parent, partner, or friend from the caring role. As in any new role; you will need education, new skills and support. Accept there will be challenges and setbacks as well as rewarding aspects. It is also important to maintain a balance, take a break and relieve stress.

You may also find it useful, comforting and encouraging to access one or more of the carer support groups in your community. Community agencies provide programs and education for families and carers to learn new behaviors and coping strategies. This type of education will help you to build on your ability to support the person you care about on their journey towards recovery. While this may be a demanding process, your perseverance will be extremely valuable for everyone concerned.

Think about what will work for you, what you would find helpful. Discussing your options with your GP may help you decide what to do. Whilst a mental health service is not able to provide certain services, we are able to recommend other services for you to contact, refer to the 'Resources for finding out more...' section of this booklet.

More information about caring for yourself and coping strategies can be found at the following links:
<https://www.carergateway.gov.au/>
<http://mhr4c.com.au/>

Care for you...



Mind your head

- Focus on positive 'self-talk'
- Give your self a break
- Maintain and build on your support network
- Make time for relaxation
- Do things that you enjoy
- Set boundaries so you can maintain your own wellbeing

"Your ability to support the person you care about depends on how well you are looking after you."

Tip:
You could say,
'I need some support for me. What services can I access?'



What you can do in a crisis

You are possibly already aware that unfortunately, in caring for someone with mental ill health, there may be times when you face setbacks, a crisis or an emergency situation, so it is important to be prepared.

It can be frightening and distressing when someone you care about is at risk to self, to you, or someone else. Try to remember that for many people this is part of the illness. It will be helpful if you can learn to recognise the warning signs leading up to when the person is at risk. You could then develop an agreed plan of action should an emergency occur.

Be mindful that following a setback or crisis you, your family members and the person you care about may continue to feel challenged and vulnerable for some time.

When the person is receptive, talk to him or her about what might trigger a crisis for them, the best ways to keep them safe and the things that might help de-escalate the situation to minimise the stress for all concerned. Also talk about what might also be helpful to reduce post-crisis stress for all concerned.

The person's Mental Health Clinician may have already discussed with them a plan for keeping them well and safe, for example a Acute Management Plan or if police are involved a Crisis Intervention Plan (refer to page 10). You can arrange to talk about any such plans together with the Mental Health Clinician and the person you care about.

It may also be useful for you to talk to the Mental Health Clinician if the person you care about is not willing to talk about crisis prevention and intervention.

As the person progresses toward recovery review the plan of action on a regular basis and agree on any necessary changes. Similarly, review the plan again when moving forward from a crisis.

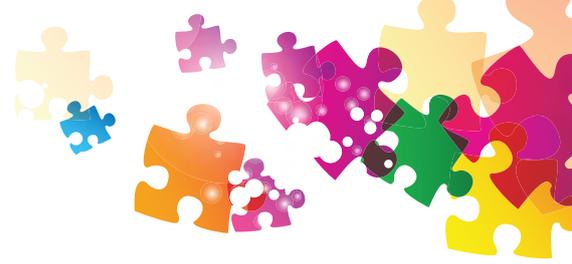
For assistance with a crisis call the Mental Health Service and speak to the person's Mental Health Clinician. The Acute Care Team of the relevant catchment area can also assist, 24 hours 365 days.

Queensland Health and the Queensland Police Service are working together to train police and ambulance officers in how to respond in a mental health crisis. In an emergency ask that a unit is sent who has completed mental health training.

For more information on support services that will assist with what you can do in a crisis, refer to the '*Resources for finding out more...*' section of this booklet.

*If the situation is **urgent** and you have **serious concerns** or there is an **immediate danger**, call **000**.*

Tip:
Discuss and agree on what to do if a crisis arises



Parents with young children

If the person you care about is a parent with young children it is important the treating team or Mental Health Clinician is aware of this. Sharing this information with the doctor/clinician can help them ensure the needs of both parent and child are attended to.

There will be additional challenges related to admission to hospital. However, it is important that parents in hospital have contact with their children. Parents often have questions related to maintaining contact with their children during admission. They also wonder how best to talk to their children about their mental health and hospital stay.

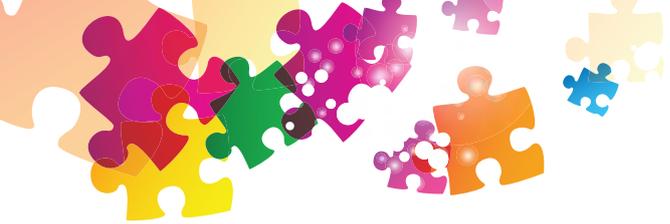
There are a number of services and resources available, including developing a family care plan to help you support both the parent with mental illness and their child/children. You may find the Children of Parents with Mental Illness website helpful: <http://www.copmi.net.au/>

Tip:
Ask how you can make arrangements for parents and children to visit in a family room separate to the common area of the ward.

Visiting at the Hospital

Helpful information...

- Inpatient visiting hours may vary across facilities, ask a staff member or check on line using the links on page 26. Family and friends are encouraged to consider the inpatients need for rest and recovery, and keep visits to a reasonable time frame.
- When visiting an inpatient, relatives and friends are **not** allowed in the bedspace areas.
- Vending machines are available. Locations vary across the sites, The wards do not provide change.
- A pay phone in the communal area on the ward is provided for inpatients to make calls. Each ward also has a designated phone for inpatients to receive calls. Ask a staff member for this number. Not all facilities allow inpatients to have mobile phones during their hospital stay, please ask a staff member if mobile phones are permitted in the ward.
- Volunteers are available to assist with directions and information.



Smoke Free Health Care

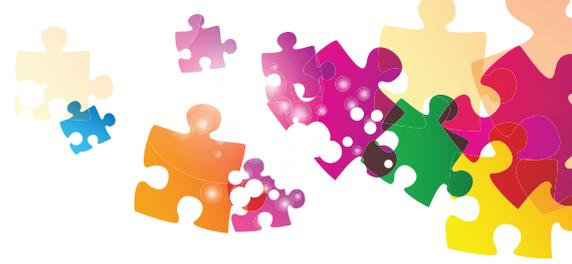
As a healthcare facility, we have a duty to provide an environment free from smoke and to reduce the risk of a person taking up (or re-starting) smoking. 'There is strong evidence that many people with a mental illness want to quit smoking and that smoking causes stress, rather than relieving it. With the right support from family, friends and health professionals, people with a mental illness can quit smoking and experience benefits including a healthier and longer life, improved self-esteem, more money to spare, and less stress.'¹

What you need to know as a visitor:

- Smoking is illegal in all hospital and community health services in Queensland (and five metres from the boundary);
- Consumers, staff and visitors are not to have tobacco or related products (this includes cigarettes, lighters, e-cigarettes etc) on the ward;
- If you have these products, please ask a member of staff to assist you to store them in locked storage at the nurses' station;
- Consumers will not have access to their tobacco and related products during their leave; they will be sent home with family/friends or stored; they will be returned on discharged, if requested.

If you have further questions, please talk to a member of staff.





Locating Facilities and Services

Use the links below to access information about getting to and around the Metro North Mental Health facilities.



Caboolture Hospital Home Page:

<http://www.health.qld.gov.au/caboolture/>



Redcliffe Hospital getting to our facilities:

<http://www.health.qld.gov.au/redcliffe/location/default.asp>



TPCH Information for Patients and visitors:

<http://www.health.qld.gov.au/tpch/html/information.asp>



RBWH getting to and around the Hospital:

http://www.health.qld.gov.au/rbwh/location_maps.asp

Note: The Psychiatric Emergency Centre is located beside



Get involved in improving the service

Metro North Mental Health is constantly striving to improve the experience that we provide for consumers.

There are opportunities for you and / or consumers to be involved in evaluating service delivery in an advisory and / or research capacity.

Participation is voluntary and you may be remunerated. If you have an interest in participating, please take the time to consider what is involved and ask any questions you might have.

We would really like to hear from you if you are interested in being involved in our quality improvement activities.

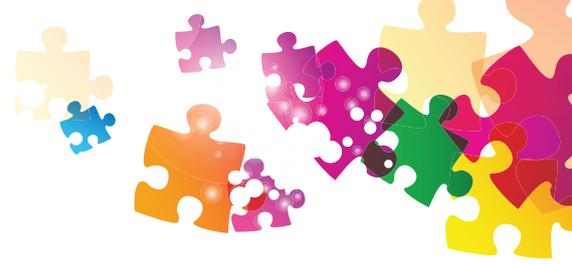
For more information contact Consumer and Carer Services in your catchment area or for research enquiries phone the Principal Research Fellow on 3646 0380.

Moving on from the mental health service

For most people an inpatient stay is on average 14 days and the need for the Community Care Team is generally not for long periods of time. Many people with mental ill health are able to receive treatment with their General Practitioner or a private psychiatrist.

As the person you care about gains skills in managing their mental ill health, the doctor and mental health clinician will discuss with them the options for ongoing care. When appropriate the person will exit the service, however they can always come back if they or the GP has concerns.





Let us know what you think...

Compliments and complaints are an important source of feedback that helps us to improve our service.

Often the quickest and most effective way to resolve concerns is to talk them through with a doctor or mental health clinician. If you prefer to let us know about your feedback in writing ask a staff member for a Compliments and Complaints form. Staff will assist you to complete the form if you require assistance.

Contact us

for more information on how you can provide feedback and / or resolve your concerns:

Caboolture Consumer Feedback: 07 5433 8199
Redcliffe Consumer Feedback : 07 3883 7728
TPCH Consumer Liaison Officer: 07 3139 4479
RBWH Patient Liaison Officer: 07 3646 8216

Tip:
let us know what you think
by using the suggestion
boxes located in wards
and clinics.

Your feedback about the information in the booklet is helpful and very welcome.

Email:
mnmh.consumer.carer.services
@health.qld.gov.au

If your concern is not resolved to your satisfaction:

Office of the Health Ombudsman;

**<http://www.oho.qld.gov.au/> OR
PO Box 1328, Brisbane Qld 4003
Phone: 133 OHO (133 646)**

This organisation is independent of the public health system.

Ryan's Rule

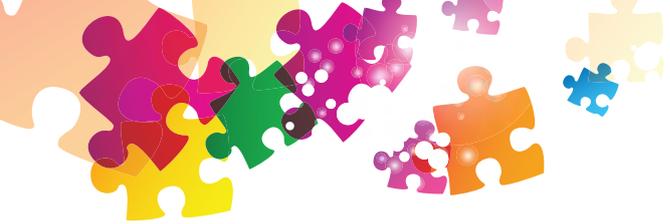
Ryan's Rule offers patients / consumers, their family and carers a process to escalate their concerns independently when they believe the patient is getting worse, is not doing as well as expected or if something doesn't feel right.

Note: Ryan's Rule **is not for making complaints**, refer above for making a complaint.

Step 1:
Discuss your concerns with the treating Nurse/Doctor

Step 2:
If not satisfied with the Step 1 response speak to the Nurse in charge

Step 3:
If you remain concerned call 13 HEALTH (13432584)



Resources for finding out more...

A wealth of information about mental illness and related support services is available from the mental health service, your general practitioner, community mental health service providers, libraries and the internet.

MNMH Recovery Support Services, Courses and Resources Prospectus

The Prospectus provides information on a wide range of recovery focused education courses and resources. The Prospectus is updated every six months, ask a staff member for a copy or an electronic copy is available at the following link; <http://www.mymentalhealth.org.au/events/>

Metro North Mental Health Consumer and Carer Services Publications and Resources

- Consumer and Carer Services Brochure
- Recovery Brochure
- Know Your Rights and Responsibilities
- Making the most of your mental health service – A guide to the Metro North Mental Health Community Clinic
- Finding Your Way Around the Ward: An Orientation to Your Inpatient Stay
- Consumer and Carer Meetings – Monthly contact 07 3114 0803 for details
- Consumer and Carer Forums – Quarterly contact 07 3114 0803 for details

Government Information and resources

Australian Government Department of Human Services:

<http://www.humanservices.gov.au/customer/themes/carers>

Australian Government Carer Gateway:

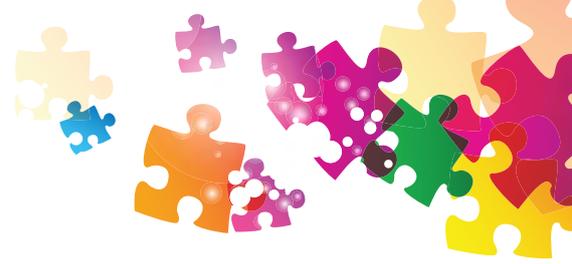
<https://www.carergateway.gov.au/>

Australian Government Health Direct:

<http://www.healthdirect.gov.au/caring-for-someone-with-a-mental-health-disorder>

Queensland Government The Public Trustee, Disability and Aged Support:

<http://www.pt.qld.gov.au/disability-and-aged-support/>



Resources for finding out more...

Once you have a clearer understanding about mental illness and its impact on the person you care about, you may find it easier to talk to other family members and friends to identify how they can best encourage and support the person with mental ill health.

Community Agencies

Telephone and online support, connecting with support groups, programs to learn and develop skills, resources, publications, respite and lifestyle support, events, research, much more....

Arafmi Queensland: <http://www.arafmiqld.org/>

Carers Queensland: <http://carersqld.asn.au/>

Suncare: <http://www.suncare.org.au>

Mental Illness Fellowship Queensland: <http://www.mifq.org.au/>

Mental Health Association Queensland: <http://mentalhealth.org.au/>

Beyondblue: <http://www.beyondblue.org.au/>

Black Dog Institute: <http://www.blackdoginstitute.org.au/>

Sane Australia: <http://www.sane.org/>

Footprints: <http://www.footprintsinc.org.au/>

Communify Qld: <http://www.communify.org.au/>

Neami National: <http://www.neaminational.org.au/>

Queensland Voice for Mental Health Inc: <http://qldvoice.org.au/>

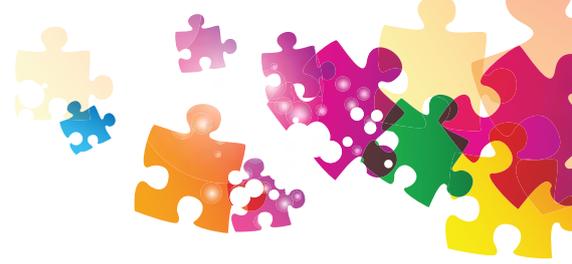
Eating Disorders Association Inc: <http://eda.org.au/>

Lifeline: <http://www.lifeline.org.au/>

Queensland Mental Health Commission: <http://www.qmhc.qld.gov.au/>

Mental Health in Multicultural Australia: <http://www.mhima.org.au/>

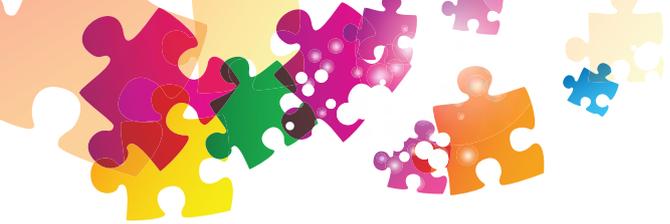
World Health Organisation – Mental Health: http://www.who.int/mental_health/en/



NOTES

Glossary

MNMH	Metro North Mental Health
MHS	Mental Health Service
RED CAB	Redcliffe and Caboolture Hospital
TPCH	The Prince Charles Hospital
RBWH	Royal Brisbane and Women's Hospital
AMHS	Acute Mental Health Service
ADS	Alcohol and Drug Service
HADS	Herston Alcohol Drugs Service
ADIS	Alcohol and Drug Information Service
MHC	Mental Health Clinician
PEC	Psychiatric Emergency Unit
CCU	Community Care Unit
MIRT	Mobile Intensive Rehab Team
CFOS	Community Forensic Outreach Service
QCAT	Queensland Civil and Administrative Tribunal



References

- Australian Government, Mental Illness and Quitting:
quitnow.gov.au/internet/quitnow/publishing.nsf/Content/mental-health-and-quitting/
- Mental Health Foundation, UK:
<http://www.mentalhealth.org.uk/help-information/mental-health-a-z/R/recovery/>
- Queensland Health, Information sharing between mental health workers, consumers, carers, family and significant others, Brisbane June 2011:
http://www.health.qld.gov.au/mentalhealth/docs/info_sharing.pdf
- Queensland Government, Health Consumers Queensland, Getting the Healthcare you need: An advocacy toolkit for people using the healthcare system in Queensland, Brisbane May 2011:
http://www.health.qld.gov.au/hcq/publications/hcq_toolkit_may11.pdf
- Australian Commission on Safety and Quality in Healthcare, Australian Charter of Healthcare Rights A guide for healthcare consumers, carers and families, Brisbane January 12:
<http://www.hqcc.qld.gov.au/Resources/Documents/Brochure-Australian-Charter-of-Healthcare-Rights-A-guide-for-consumers-carers-and-families-English-Jan-2012.pdf>
- Queensland Government, Queensland Health Carers Matter Website:
<http://www.health.qld.gov.au/mhcarer/default.asp>
http://www.health.qld.gov.au/mhcarer/getting_help.asp
<http://www.health.qld.gov.au/mhcarer/docs/articlelisten.pdf>
<http://www.health.qld.gov.au/mhcarer/docs/fs1-gettinginvolved.pdf>
<http://www.health.qld.gov.au/mhcarer/docs/fs4-dualdiagnosis.pdf>
- Queensland Government, Queensland Health, Staff who work in our services Fact sheet:
http://www.health.qld.gov.au/mentalhealth/docs/staff_in_our_services.pdf
- Queensland Government Choice and Medication website:
<http://www.choiceandmedication.org/queenslandhealth/>
- Australian Government, Department of Health and Ageing:
<http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-pubs#W>
- Australian Government Health Insite - Caring for someone with a mental health disorder:
<http://www.healthinsite.gov.au/article/caring-someone-mental-health-disorder>
- Queensland Government, Queensland Health, MHA2000 Fact sheets Purpose, principles and definitions: <http://www.health.qld.gov.au/mha2000/factsheets.asp>
- Queensland Government, Queensland Health, RBWH
<http://www.health.qld.gov.au/rbwh/standards/default.asp>