MENTAL HEALTH INFORMATION RESOURCE

IS YOUR MENTAL HEALTH OR THE MENTAL HEALTH OF SOMEONE YOU CARE ABOUT AFFECTING YOUR LIFE?
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Mental Illness and Caring

What is mental health and mental illness?

Mental health is equally important to wellbeing as physical health. Mental health affects how we think, feel and act, often effecting day to day functioning, and ability to cope well with the ups and downs of life.

There are many things in life that can impact our mental health. Some examples are;

- Day to day stressors such as meeting a deadline at work or caring for children;
- Major life changes such as moving to a new country, starting school, changing jobs or retiring;
- Grief and losses such as being fired from a job or the death of loved one;
- Traumatic events such as experiencing an accident, violence or disaster.

Life can often leave us feeling sad, anxious, distressed, angry and confused. It is natural to feel this way some of the time especially when something goes wrong, or we experience a trauma or a loss. However, if we feel this way most of the time or if these feelings are overpowering, then this is an indication that something might be wrong. Mental illness happens when the way that we think and feel consistently interferes with our ability to feel good, maintain meaningful relationships with others and cope with challenges that come our way. Experiencing emotional distress or mental illness can be confusing, and it sometimes seems like no understands. Likewise, if someone you care about experiences mental illness it can be difficult to figure out what is going on or how to help them.

Remember: You are not alone. 1 in 2 people will experience mental ill health at some point in their life.¹

Mental illness is common and can happen at all stages of life. Some people experience mental illness once off and then recover, while other people might experience multiple occurrences of mental illness.

What is mental health stigma?

Stigma refers to negative attitudes and beliefs towards a particular group of people which are the result of misunderstanding and prejudice. Many people have negative attitudes to mental illness, making it difficult to talk to others when we experience distress or need to seek help. Stigma can make people feel embarrassed or ashamed about something which is out of their control, resulting in people feeling afraid or uncomfortable to seek help when they experience distress.

Here is some information about mental illness;

- Mental illness is common; Up to 1 in 2 people experience mental illness at some point in their lives. At least 20% of adult Australians are affected by mental illness every year.²
- Mental illness is real; Some people think that mental illness is a sign of weakness or it’s not as serious as physical illness. They might tell people to “toughen up” or to “snap out of it” when they experience distress. Mental illness is just as serious as physical illnesses and it can take time, effort and support from health professionals to recover.

² Ibid.
People who experience mental illness live meaningful lives; People who experience mental illness often recover after seeking support and/or continue to live meaningful lives.

There are many reasons that people experience mental illness; Mental illness does not happen because people are weak. The causes of mental illness are complex.

Factors which can contribute to a person experiencing mental illness include;

- Trauma in the past. This can be caused by anything such as being in an accident or experiencing violence;
- A lot of stress or some stress for a long time can contribute to mental health issues;
- Genetic predisposition to mental illness. Some mental illnesses like bipolar disorder or schizophrenia can run in families. This does not mean that the person will have a mental illness it just means that the likelihood may increase;
- An imbalance of chemicals in the brain. Sometimes mental health symptoms can be caused by physical issues. For instance, thyroid problems can cause depressive symptoms.

Many people seek support and find that speaking to a professional helps to improve their mental health and they begin to feel better about themselves and are able to cope with life.

Am I a carer?

Most people care about their family and their friends and will try to help them if something is wrong. But, what makes a person a carer?

A carer is someone who spends some of their time supporting someone else. This support can include providing emotional support, physically helping with day to day tasks or providing financial assistance.

You don’t need to be a paid professional to be a carer, many family members provide care and support to their relatives. You don’t need to be related to a person to be their carer either, e.g. friends or neighbours.

You don’t need to live with the person or care for the person all the time to be a carer. Many carers only provide assistance and support from time to time when the person is feeling very unwell.

You also don’t need to provide very intensive support or many hours of support to be a carer. Some carers simply provide support here and there by listening to the person and supporting them emotionally when they are feeling unwell.

You can be a carer at any age. Some young children are also carers for their siblings, parents or relatives. People under the age of 25 who provide care and support to someone are ‘young carers’.

There is no such thing as a ‘typical’ carer. Carers come from a range of backgrounds, they can be young or old, male or female, friend or relative. Many people who support someone else don’t realise that they are a carer because the support they provide is a normal part of their relationships. This highlights that being a ‘carer’ is very normal and very common.

Getting Support

Why should I seek support?

Many people who experience mental ill health and seek help from health professionals are able to;

- Improve how they feel;
• Avoid getting worse and avoid long term mental health challenges;
• Develop strategies to help them cope with challenging situations;
• Develop or maintain healthy relationships with friends and family;
• Get well again or find a way to lead a satisfying and fulfilling life as possible.

Many carers of people living with mental illness find carer supports are helpful to;
• Improve how they cope with life’s challenging situations;
• Reduce stress and improve emotional wellbeing;
• Learn strategies and information around mental illness and their caring role;
• Learn and share experiences with others in similar situation.

Seeking help early, when you first have concerns or experience distress, helps to prevent things from getting worse. Evidence tells us that when people seek support when they first experience mental health symptoms, they are more likely to get better sooner and stay well for longer. This doesn’t mean that you shouldn’t seek support if you have been feeling unwell for a while. Mental health support helps people to feel better and achieve their goals even if they have been unwell for a long time, but earlier is better.

Will my cultural background be respected and understood when I seek help?

Getting help can be very challenging, especially when you come from a different cultural or linguistic background as different cultures have different ways of understanding mental health and of caring for someone who is experiencing mental illness.

Sometimes local services will provide mental health supports specifically designed for your community or will employ bilingual workers that speak your language. When you seek support, it can be useful to check whether there are local services provided in your language.

It can be valuable to be open minded and to try new or different ways of looking after ourselves. Even if services and workers understand mental health in a way that is different to you, there are often things that can be learnt from each other.

At the same time, you have the right to speak to someone who is respectful of you and your culture and who helps you to feel comfortable. Sometimes language and cultural barriers can make services less accessible for people from different backgrounds. You should express any concerns you have about differences in language and culture and explain how you would like to be supported.

Having said this, services should not treat you differently if that makes you feel isolated or discriminated. If any process makes you feel uncomfortable you should discuss this with the service. Staff should be empathetic and help you to feel supported when you discuss these issues.

Will other people in my community find out if I seek help?

Often CALD communities are very small or tight knit. In some CALD communities there is a lot of stigma and shame connected to mental ill health. Often this means that people have concerns about their privacy and confidentiality. Many people worry that if they seek help their community will find out that they are having problems.
Your right to privacy and confidentiality is protected in Australian law. When you speak in private to any healthcare professional (including doctors, psychologists, psychiatrists and counsellors) the information you share should be kept private. The only exception is when you tell someone that; you are going to seriously hurt yourself, hurt someone else, commit a serious crime or your children are at risk of harm or abuse. In this case the person might notify relevant authorities such as police, ambulance or child protective services to ensure the safety of all.

All community services, including mental health and carer services, should have a privacy and confidentiality policy. You can call or email the service to ask about how they will maintain your privacy and confidentiality before you attend in person.

Some people who are members of small CALD communities, prefer to receive support from someone who is not part of their community to help to protect their confidentiality. You can talk to services and explain that you would prefer not to see a worker from certain cultural background(s) if this is a concern for you. It can be helpful to explain the reasons for your preference when you make this request.

Can I visit health services without my family’s approval? If I seek help will my family find out?

You do not need the approval of family members to visit health services. All adults (aged 18 and over) can contact and visit health services privately and confidentially without their family’s approval.

Health services are not allowed to share any details about you with your family members without your permission or tell your family members whether you have attended their services. They are not allowed to give your health records or tell your family about any physical or mental health conditions which you have been diagnosed with.

The only exceptions to this rule are;

1. **If you are a young person;**
   - Automatic confidentiality means that unless you are at risk of serious harm your doctor is required to keep your information private. The age at which you have automatic confidentiality rights is 16 in NSW.
   - Even if you are under 16 most of the things you say to a doctor, including information about sex and drug use, will be kept private.

2. **If you are an involuntary mental health patient;**
   - You can only be treated involuntarily if you say something or act in a way that indicates you are at risk of serious harm due to mental ill health. If you are treated involuntarily your family members may be contacted and provided with some information about your treatment.

Who can help me to communicate with services if we don’t speak the same language fluently?

Language barriers can make getting support seem impossible. It can be hard enough to communicate about mental health when we speak the same language. Doctors and health professionals sometimes use complex language and technical terms which most native speakers would find difficult to understand.

*Ask for a translator;*
We encourage anyone who feels more comfortable speaking in a different language to ask for a translator when they attend services. Professional translators are trained to know the correct translations for medical jargon, complex terminology and common acronyms to help avoid misunderstandings. Using a professional translator also means that you can discuss sensitive matters privately.

The “Translating and Interpretation Service” (TIS, ph. 131 450) is nationwide and used by many community services. Most services such as GPS will cover the costs of TIS so that you can access a translator for free. Services are completely confidential which means that anything you say will not be disclosed to anyone else. The only exception is if you plan to seriously hurt yourself or someone else or to commit a serious crime then this will be reported to the authorities.

TIS provides translation services in numerous languages, including Vietnamese, so you can ask for the language of your choice. TIS will provide over the phone translation when you need it. If you would prefer an in-person translator, then this needs to be booked in advance. TIS can also provide your choice of either a male or female translator so that you can discuss sensitive issues.

*Ask about services with bilingual workers*

Some mental health services employ bilingual support workers or health professionals. It can be useful to ask to see if there are any services nearby which employ a worker who is able to speak to you in your language.

*Google Translate*

Although we strongly recommend arranging for a translator or bilingual worker for important conversations and appointments, google translate can help to overcome initial communication barriers and arrange for support in your language. You can access google translate at [https://translate.google.com.au/](https://translate.google.com.au/)

*There are so many services its overwhelming. How do I know which one is right for me?*

Often people find it very confusing trying to understand what each service does, how much it costs and who is eligible for it. It can be really overwhelming to know where to start. It is also very understandable that people feel discouraged if they contact many different services and find out that they are not eligible.

*Ask local services about supports in the area;*

If you already have some supports, ask workers if there are local services that provide the type of support you want. Often local services will know about other services in their area. If you care for someone who receives mental health services (such as hospital services, counselling or local programs), you can contact these services and ask if there are any carer supports available nearby.

If you care for someone in hospital, ask for a social worker. Social workers can help you understand and connect with different services.

*Avoid having to tell your story over and over again;*

Often people tell their story multiple times in order to find the right service that can support them. While some people find it helpful to share their story with people who are understanding, empathetic and knowledgeable of local mental health supports, many people may find it distressing and unhelpful to tell their story repeatedly.
Here are some tips to help avoid needing to retell your story;

- Think and write down what you want to say beforehand.
- Consider whether there is anything that you don’t want to share.
- Consider how you want to contact services, sometimes it can be nice to ring or visit a service, so you talk to someone in person.
- Before you share personal details, ask what type of supports the service provides.
- Take your time to think about how you can clearly describe the type of supports you want.
- If the service doesn’t provide what you want, ask if they know of any other alternatives which might be useful to you.
- Ask about the eligibility criteria for support. If you think you are eligible, you can then select relevant details about yourself that demonstrate you meet the eligibility criteria.

**Over the phone services**

Telephone information lines and helplines are often a good alternative to contact if you want someone to listen to your story with empathy and provide practical information and referrals. Some useful telephone supports include;

- **Grief Line;** telephone counselling, you don’t need to have lost someone close to you to contact, phone: 1300 845 745
- **Mental Health Carers NSW Carer Connections Line;** information and referrals for carers of people living with mental illness, phone: 1300 554 660
- **Way Ahead Anxiety Information Line;** anxiety disorders information phone service to people who are attempting to locate mental health and anxiety support in their local area, phone: 1300 794 992
- **Lifeline;** 24-hour support for people experiencing a crisis. Carers of someone who is experiencing a mental health crisis, including; suicidal thoughts, can phone: 13 11 14. If someone is at immediate risk of harm, contact emergency services by calling 000.

What services are there for people from Culturally and Linguistically Diverse Backgrounds?

**Transcultural Mental Health Centre**

The Transcultural Mental Health Centre is a state-wide initiative which works with people from culturally and linguistically diverse backgrounds, health professionals and services to support good mental health. The transcultural mental health centre runs support groups, educational sessions and counselling in various regions in NSW.

Phone Number: 02 9912 3850
Email: tmhc@health.nsw.gov.au

**STARTTS**

STARTTS is the NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors. STARTTS works with survivors of torture and refugee trauma to facilitate the process of healing. Individuals can access free services such as psychiatrists, physiotherapists, acupuncturists, nutritionists and receive neurofeedback. STARTTS also runs group counselling, information and education sessions, social support groups, arts and sports groups and youth camps.

Phone Number: 02 9646 6700
Email: stts-startts@health.nsw.gov.au.
Navigating the System

Getting support for family and carers; Where do I start?

Caring for someone else when they are experiencing mental illness can be very stressful and confusing. Many carers want to help the person they care for but feel at a loss for how to do this. Often carers find it difficult to look after themselves and do things that they enjoy because they are busy trying to support someone else.

Sometimes carers can also experience stigma or feel shame because of their loved one’s mental ill health. This can be fuelled by negative attitudes to mental illness in the community and can make it hard for carers to ask for support. If you feel this way, you are not alone - many carers have come forward to seek help and felt supported and less stressed.

There are many different types of support for carers including:

- **Support Groups**: provide an opportunity to meet people in similar situations, discuss the challenges of caring and learn from other group members.
- **Individual Counselling Sessions**: provide an opportunity to confidentially talk with an experienced professional about your goals, your role as a carer and any challenges you are experiencing.
- **Training for Carers**: provide information on accessing available services and strategies to help you as a carer.
- **Carer Respite**: help to provide carers with a ‘break’ from caring by supporting the person that the carer looks after. However, respite services can sometimes be hard to access.

The Family and Carer Mental Health Program

The Family and Carer Mental Health Program is run by various organisations across NSW and provides a range of supports for family members and carers of people living with mental illness. The type of support provided varies depending on location but will generally include support groups for all carers. Carers may also be able to access:

- One on one carer counselling
- Educational sessions for carers
- Individual advocacy to help carers to communicate with hospital staff

To access support, you will need to call the Family and Carer Mental Health Program for your region.

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone</th>
<th>Hours</th>
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<tbody>
<tr>
<td>Aftercare South Hurstville</td>
<td>(02) 8287 6810</td>
<td>Monday to Friday 9am - 5pm</td>
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<tr>
<td>Parramatta Mission Penrith</td>
<td>(02) 8880 8160</td>
<td>Monday to Friday 8am - 4pm</td>
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<tr>
<td>Parramatta Mission Chatswood</td>
<td>(02) 8599 4855</td>
<td>Monday to Friday 8am - 4pm</td>
</tr>
<tr>
<td>Parramatta Mission Seven Hills</td>
<td>(02) 8599 4880</td>
<td>Monday to Friday 8am - 4pm</td>
</tr>
<tr>
<td>One Door Mental Health Bankstown</td>
<td>(02) 9708 2670</td>
<td>Monday to Friday 9am - 5pm</td>
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Getting mental health support; Where do I start?

Accessing services

- General practitioners (GPs) and Emergency Departments (EDs) act as the main entry to other health services;
- If it’s not an emergency, the first place to go for anyone concerned about mental health is to see a GP;
- GPs are here to support, not judge.

Finding the right GP

- Ask friends, neighbours who they use for recommendations;
- Search on the internet for ones located in the area;
- Ask if they charge a “gap” fee and how much. A bulk bill clinic is good if you are on a budget.
- Some medical professionals can be found via the website: https://www.beyondblue.org.au/get-support/find-a-professional or you can contact the Mental Health Information Service on 1300 797 991
- For an afterhours GP helpline call: 1800 022 222
- Perhaps requesting a longer consultation time, so that the Dr can get a better understanding of your situation, support needs and decide with you on appropriate referrals.

When seeing a doctor, they will assess what help you need. This could include:

- Making a mental health assessment;
- Create a mental health treatment plan;
- Refer you to a psychiatrist or other mental health professionals;
- Giving you prescriptions for medicines to treat depression or anxiety.

How can I Get Mental Health Support for my family?

Can I access support for my family?

Sometimes people experiencing mental illness do not want to receive support for various reasons. Unless someone is at risk of serious harm or going to harm others you cannot force them to get mental health support, even if they are very unwell.

You can encourage someone who is unwell to seek supports. It is often helpful to have an open and empathic discussion with the person. Some tips to do this include;

- Pick a suitable time and place to have a discussion.
- Ask the person about how they are feeling.
- Let them know that you are on their side.
- Talk sensitively to the person about the changes that you have noticed in their behaviour.
- Avoid blaming or accusing the person.
- Remember that their emotions and thoughts are very real to them.
- Rather, listen empathetically and encourage the person to seek support.
- Ask the person how they feel about accessing supports and be understanding that accessing supports can be daunting.
• If appropriate, ask them what they believe will help. Traditional and cultural healing methods can be used in conjunction with health services.³ It can be valuable to be open minded and try different things together.

• Encourage people to seek mental health supports. Offer to go to a GP as a starting point for help.

It can also be helpful to educate yourself on mental health. Seek information on different types of mental illnesses and the types of supports that are available. Develop a plan so that you know what to do if the person’s behaviour escalates to a point that they are a danger to themselves or others.

**Useful websites on mental health are listed below:**

- [https://www.beyondblue.org.au/](https://www.beyondblue.org.au/)
- [https://www.blackdoginstitute.org.au/](https://www.blackdoginstitute.org.au/)
- [https://headspace.org.au/](https://headspace.org.au/)
- [https://www.mindaustralia.org.au/resources/understanding-mental-health-conditions](https://www.mindaustralia.org.au/resources/understanding-mental-health-conditions)
- [https://schools.au.reachout.com/understanding-mental-health](https://schools.au.reachout.com/understanding-mental-health)

**Can I contact services that my family attends and discuss my concerns?**

Yes. If you know that your family member uses mental health services, you can contact these services. Often it is helpful to have a respectful discussion about the possibility of attending services together with your family member and see if they are open to you doing this.

Even if your family member does not want you to contact the service, you can still contact services and let them know about any concerns you might have. Services can listen to your concerns, but they are not allowed to tell any personal details about their clients including information about their treatment. Some services will provide general recommendations; however, they will not discuss the specifics of your family members situation without their permission.

Often services will have rules for how they respond when family members or carers contact them. If you are concerned about this, you should check with the service to see how they treat carers privacy and confidentiality.

**Can I access information about my family from services?**

Not without your family member’s permission. Services are not allowed to share information about their clients, this includes whether they are using the service, any health condition which they have and their treatment. The only exceptions are;

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• If your family member is under the age of 16 then the doctor, psychologist, counsellor or support worker may provide you with some information.

• In deciding what information to tell you services will consider things such as; the young person’s age and maturity, how independent the young person is, how serious the treatment is, whether the person understands the treatment and possible side effects.

• If your family member says something which indicates that they danger to themselves or others, then they can be made an involuntary patient. In this case mental health services are required to provide some details to family members who care for the person.

The NDIS
What is ‘psychosocial disability’?
The National Disability Insurance Scheme (NDIS) uses the term ‘psychosocial disability’ to describe when the way a person thinks, feels or interacts with others (i.e. their mental health) interferes with their ability to participate in day to day life. This can happen when a mental health condition interferes with a person’s ability to;

• Complete day to day tasks like tidy their apartment or cook themselves dinner, or manage their financial budget,
• Stay physically healthy and active,
• Maintain independent accommodation,
• Engage in employment, volunteer or study opportunities,
• Make friends, interact with and have meaningful relationships with others,
• Pursue life goals.

Who is eligible for the NDIS?
The NDIS will fund people living with ‘psychosocial disability’ to access supports and services if;

• They are aged between 7 and 65;
• They are a permanent resident or citizen of Australia or hold a Protected Special Category visa;
• They have a permanent disability; This means that their disability is likely to be permanent. People who have “episodic mental ill health” may be eligible. This means that they are well most of the time but experience ‘episodes’ of mental ill health from time to time.
• Their disability is significant; This means that their disability has a significant impact on their ability to function.

How do I apply for the NDIS?
Applying to the NDIS can be a daunting task. You will need to fill out paperwork and provide evidence to demonstrate that you are eligible, such as medical records.

Some mental health services will help people to access the NDIS. If you have a support worker, psychologist, counsellor or doctor who you already trust you should check whether they will help to complete the application.
What sort of supports can I get from the NDIS?

The NDIS will provide you with funding to access supports which are ‘reasonable and necessary’ that you want so that you can participate in day to day life and pursue meaningful life goals.

The NDIS is based on *choice and control*. This means that you get to decide what supports you want to have, what services you want to use and when you want to access these supports.

NDIS supports can be anything from regular sessions with a psychologist or help with day to day chores around the house to help to attend recreational activities or social groups. You get to choose the supports that will help you achieve your goals.

I’m a family member/carer, can the NDIS support me?

The NDIS does not directly provide support to family members. Sometimes, by supporting the person you care for, the NDIS can reduce the amount of time and energy that you spend caring. It might also let you take additional breaks from caring for your family member. This is not always the case for family members.

Family members can communicate with the NDIS. The NDIS will hold a planning meeting to determine the type of support that your family member can access through the NDIS. Family and carers can attend planning meetings with the permission of the person that they care for. If you are a guardian of the person then you can attend planning meetings and make decisions without the permission of the person.

Family members and carers can submit a ‘Carer Statement’ for consideration by the NDIS prior to planning meetings. You can view an example of a Carer Statement here: [http://carersaustralia.com.au/storage/de-identified-carer-statement-1.pdf](http://carersaustralia.com.au/storage/de-identified-carer-statement-1.pdf)

You should let the NDIS know about;

- The support which you provide the person you care for;
- Whether you want to continue to provide certain types of support or whether you would prefer for your family member to access this support through the NDIS;
- The type of supports which you believe would be useful and why;
- Difficulties and challenges which you experience in your caring role.

More Information;

NDIS – Phone 1800 800 110, or visit the website: [https://www.ndis.gov.au](https://www.ndis.gov.au)

Reimagine today - is a website designed to provide detailed information and support to people living with mental illness, their family and carers to help them to access the supports they want through the NDIS. Visit [https://reimagine.today/](https://reimagine.today/) for more information.
Responding to Crisis
Suicidal thoughts/behaviours

Sometimes people who are experiencing a mental illness such as depression feel overwhelmed with pain, a sense of isolation and hopelessness. These feelings can then turn into thoughts that life is starting to become too painful and difficult to manage. It is important to remember if you are having these thoughts or feelings of ending your life that there is help out there and services that will support you during this time. For more information, go to https://www.beyondblue.org.au/the-facts/suicide-prevention/feeling-suicidal

Warning signs for suicide

Major warning signs for suicide include talking about killing or harming oneself, talking a lot about death, and seeking out items that could be used in a suicide attempt. More subtle warning signs of suicide is hopelessness. People who feel hopeless may talk about “unbearable” feelings, and say they have nothing to look forward to. Some warning signs may involve physical and behavioural changes as well as changes in feelings and thoughts.

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<th>Physical changes</th>
<th>Behavioural changes</th>
<th>Feelings and thoughts</th>
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</thead>
<tbody>
<tr>
<td>Loss of energy</td>
<td>Withdrawn from family and friends</td>
<td>Hopelessness</td>
</tr>
<tr>
<td>Poor personal hygiene</td>
<td>Self-harm (e.g. cutting)</td>
<td>Depression</td>
</tr>
<tr>
<td>Weight gain or loss</td>
<td>Drop in mood</td>
<td>Sadness</td>
</tr>
<tr>
<td>Sleep changes (too much sleep or too little)</td>
<td>Angry</td>
<td>Failing to see a future</td>
</tr>
<tr>
<td>Decreased work performance</td>
<td>Getting personal affairs in order (e.g. making a will or giving away possessions)</td>
<td>Saying you are worthless</td>
</tr>
<tr>
<td></td>
<td>Risky behaviour (e.g. consuming excessive alcohol or other drug use)</td>
<td>Talking about death or wanting to die</td>
</tr>
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Responding to suicidal signs

Tip 1: Speak up if you’re worried:

- If you see warning signs, you might think – “what if they get angry at me, what if I am wrong?” it is natural to feel uncomfortable, but anyone showing warning signs of suicide needs support.
- To find out if someone is suicidal, “ask” - you cannot make a person suicidal by asking them.
- Speak openly as it lets them know you are taking what they are saying seriously and you care.

Ways to start a conversation about suicide:

- “I have been concerned about you lately”
- “Recently, I have noticed some differences in you and wondered how you are doing”
- “I wanted to check in with you because you haven’t seemed yourself lately”
Questions you can ask the person:
- Be direct, “Are you having thoughts of suicide”
- “How long have you been feeling this way?”
- “How can I best support you right now?”

What you can do that helps:
- Let them know they are not alone in this.
- Be yourself, let them know you care.
- Listen, let the person talk.
- Be sympathetic, be calm and non-judgemental.

Tip 2: Respond quickly in a crisis
- If a friend or family member tells you that they are thinking about suicide, it’s important to work out the level of danger.
- Those who are at high risk often have a plan and intent to carry out the plan.

Questions to assess level of risk for suicide:
- Do you have a plan to take your life? (PLAN)
- Do you have a time-frame for taking your life? (TIME-FRAME)
- Do you intend to act on this plan? (INTENTION)

Assess the risk of suicide:
- Low – some suicidal thoughts, no suicide plan and no current intent.
- Moderate – suicidal thoughts, vague plan and no current intent.
- High – suicidal thoughts, specific plan, but no current intent.
- Severe – suicidal thoughts, specific plan and stating they will attempt suicide.

Tip 3: Offer help and support
- If a friend or family member is suicidal, the best way to help is to listen. It may encourage them to open up
- Let them know they are not alone.
- If you are helping a suicidal person, don’t forget to take care of yourself.

To help a suicidal person:
- Get professional help, call Emergency Services on 000, or Lifeline on 13 11 14
- Make a safety plan
- Remove potential means of suicide e.g. pills, knives, razors
- After the crisis and help is received, follow up and check in on the person often

How to keep yourself safe
Try to focus on finding ways to stay safe. These might include:
- Remembering that thoughts are just thoughts, you don’t have to act on them. They might last only a few minutes, and you might feel differently in a few hours.
- Delay any decisions to end your life. Give yourself time to get the support you need.
- Remove anything in the house that you might use to harm yourself.
• Have crisis line phone numbers accessible, for example stuck on your fridge, or stored in your phone.
• Avoid being alone. Have someone near you until your negative thoughts decrease.
• Avoid using drugs or alcohol.

Getting help
If you need to talk to someone there are numbers you can call, and they are listed below;

Emergency Numbers
1. Emergency services: 000
2. Lifeline: 13 11 14
4. Suicide Call back Services: 1300 659 467

You can also talk to someone who you feel comfortable with and trust such as the GP, counsellor or psychologist, family or friends, a teacher at school or university as well as a coach or work colleague.

When to call an ambulance and when to call community mental health services
During a mental health crisis, it can be difficult to know when and who to contact for assistance. The following information can help in responding to a mental health crisis or emergency.

When to call an ambulance?
If you require urgent medical attention or are in danger contact the Ambulance Services directly on Triple Zero (000). Triple Zero (000) should be left for emergencies only, so it is important to work out what constitutes an emergency:

• Any situation that poses an immediate risk to a person’s health or life
• Immediate threat to you, your family or someone else’s safety
• Immediate risk to the physical health of your family member or another person
• Any situation involving sudden illness or injury

In an emergency
If you are with someone who is in immediate danger, or concerned for their safety in any way:

• Call Triple Zero (000) and request an ambulance. Stay on the line, speak clearly, and be ready to answer the operator’s questions.

When not to call an ambulance?

• If you are uncertain about whether an ambulance is required, call a health advice line
• Phone: Healthdirect Australia – 1800 022 222 (24-hour health advice line)

When to call Community mental health services?
If you feel that you or a person you know with a mental illness is heading for a crisis, ring the Mental Health Line on 1800 011 511, or if they are linked in with a mental health worker or care coordinator, contact them. They will be able to help identify early warning signs and assist with making a response plan. This may help in preventing or reducing the impact of a crisis. For more information go to NSW Health.
Mental Health Line (1800 011 511)

- This is a 24-hour telephone service operating seven days a week across NSW.
- You can speak with a mental health professional about your symptoms and be connected with appropriate care.
- Mental health professionals will ask questions to determine if you or the person you are concerned about needs ongoing mental health care and how urgently it is needed.
- They may offer you an appointment at the community health centre, or a clinician may come to your home to complete an assessment and plan treatment with you.
- Community mental health services are free to the public.

You should call the Mental Health Line if you:

- Want information, advice or assessment of mental health problems.
- Would like to see a mental health worker.
- Want referrals to local mental health services.

What happens if I call 000?

When you call Triple Zero (000) make sure you stay calm and ensure your responses are clear and concise. A highly trained Emergency Medical Dispatch Officer will ask several questions. Stay on the line and do not end the call until you are told to do so.

Assess the situation:

- Is someone seriously injured or in need of urgent medical help?
- Is your life or property being threatened? e.g. if there is a fire in your home.
- Have you just witnessed a serious accident or crime?

If you answered ‘YES’ to any of these then call Triple Zero (000), which is free.

When you call Triple Zero (000), they will ask if you want Police, Fire or Ambulance. Stay calm, don’t shout, speak slowly and clearly. Tell the person your exact address and location.

Tips when making a Triple Zero (000) call:

- Stay calm and call from a safe location
- Stay on the line while you are connected to an emergency service operator, who will take details of the situation
- Give the operator the details of where you are, such as street number, name and nearest cross street
- Don’t hang up until the operator has all the information

If you do not speak English, call Triple Zero from a fixed line, say ‘Police’, ‘Fire’ or ‘Ambulance’. Once connected to the nominated emergency service, stay on the line and a translator will be organised.
What happens if I call the community mental health service?

Community mental health teams support people living in the community who have complex or serious mental health problems. They provide a range of services designed to help support your recovery and help you stay well in the community, offering specialist services for young people, children and families, adults and older people. Services include Acute Care support, Care Co-ordination or Assertive Outreach support. There services include bilingual mental health workers and workers with a lived experience (peer support workers), interpreters are available on 02 9515 0030.

Community mental health are open Monday to Friday 8.30am – 5pm.

How to contact Community Mental Health team?

Community Health Centres can be contacted directly for people currently receiving care. For new referrals it is preferable to contact the Mental Health Line 1800 011 511. The Mental Health Line is for anyone needing advice about mental health matters, including how to contact or connect with a mental health service. The service is for people of all age groups, living in NSW.

About inpatient services

Inpatient mental health services

Sometimes a higher level of support is required for a person experiencing mental illness. This care may not be able to be provided in the person’s home and community therefore an inpatient stay may be necessary. Inpatient units provide intensive psychiatric care to people experience mental illness.

Admission to an inpatient service

- If symptoms of the illness are severe and the person is not coping in their usual environment
- If the treating team want to change medication, the person might require an admission for close monitoring to ensure no harmful side effects
- If the person is at risk and general well-being is at risk

When you present to the emergency department you can expect to be seen by a medical officer e.g. social worker, and upon admission by a psychiatrist within 24 hours where they will develop a care and treatment plan together with you. Referrals can also be made via the GP, yourself and your family.

Mental Health Law and Involuntary Treatment

Patients in mental health facilities are governed by a special body of law called the NSW Mental Health Act.

<table>
<thead>
<tr>
<th>Rights of involuntary patients</th>
<th>Rights of voluntary patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Must be given verbal explanation and written statement of their legal rights.</td>
<td>• Similar to involuntary patients.</td>
</tr>
<tr>
<td>• If the patient unable to communicate in English, the explanation must be given in a language they understand.</td>
<td>• Statement of rights must be provided on admission.</td>
</tr>
<tr>
<td>• After being detained, the patient must be notified that ‘a mental health inquiry will be held’, this means appearing before the Mental Health Review Tribunal.</td>
<td>• Held for up to two hours to assess whether to detain them as an involuntary patient.</td>
</tr>
<tr>
<td></td>
<td>• May choose to nominate up to 2 people to be designated carers.</td>
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</tbody>
</table>
Principal carers and Designated Carers

**Principle Care Provider**
An individual who is primarily responsible for providing support or care to the person. A principle care provider of a person may also be a designated carer of the person. A medical officer may determine who is the principle care provider of a person.

**Designated Carer**
A patient may nominate up to two designated care providers. A designated carer is the guardian of the patient, the parent of the patient under the age of 15, or a person nominated by the patient. If there is no nomination of a designated carer, then the designated carer of the patient is:
- The parent of a patient who is a child
- The spouse
- An individual who is primarily responsible for providing support or care to the patient
- A close friend or relative of the patient

The patient may nominate people they wish to exclude from being given notice or information; however, a medical officer can overrule a nomination if he/she reasonably believes that:
- The patient is incapable to make such decisions
- Fulfilling the patient’s nomination may put the patient, or any other person, at risk of serious harm
- A patient that is a child (under 18) cannot exclude their parents

**Admission; what to expect**

**Mental health presentations**
If you present at the emergency department, staff will triage you, and includes:
- Initial risk assessment (risk of aggression, self-harm, suicide)
- Determination of observation level

A person can be admitted to hospital under the NSW Mental Health Act as a voluntary or involuntary patient. This happens when a person is mentally ill and at risk of serious harm to themselves or others. This includes physical harm, harm to reputation, relationships, finances and self-neglect. If you are concerned about yourself or someone else, contact your local area mental health service.
Voluntary Admission
- This occurs when a person feels mentally unwell and admits themselves to hospital for a period of treatment

Involuntary Admission
- This occurs when a person is admitted or detained in a mental health facility against their wishes
- A GP, community mental health team, ambulance officer and police officer can ‘schedule’ someone if they reasonably believe the person appears mentally ill
- Once they get to hospital, they are assessed by at least two doctors and a decision is made whether hospital treatment is appropriate.
- A person is given a Statement of Rights under these circumstances and can seek independent advice if they believe they are being unjustly detained.

Treatment; what to expect

How will inpatient units help you?
Coming into hospital can be a really distressing time, but they aim to:
- Support your recovery
- Work collaboratively with you, you family/carers towards the best mental health outcome
- Plan for your leaving the facility and returning home with the right support

What supports you will receive
- Consult with psychiatrist
- Nurses
- Social workers and occupational therapists
- Drug and alcohol nurses
- Peer workers and advocate

They run individual and group activity programs to help build skills that will support your mental health recovery.

Complaints
It is best to resolve complaints with the manager of your healthcare provider. Try to remain calm and be as clear as possible about what happened and how you would like it resolved. If the issue is not being dealt with properly you can contact or write to the Director of the Mental Health Service.

Complains can be lodged with the NSW Health Care Complaints Commission (HCCC): 1800 043 159

Official Visitors
- Official visitors aim to safeguard standards of treatment
- Advocate for the rights and dignity of people being treated under the NSW Mental Health Act
- They make regular visits to inpatient psychiatric facilities
- There is mail box in each ward for messages and they can be contacted on: 1800 208 218
Discharge; what to expect

Who can be discharged from the ED to the community?

Generally, patients with:

- Low risk (harm to self or others)
- Anxiety disorders (with no suicidal ideation)
- Non-melancholic depression
- Chronic mental illness not requiring acute inpatient-care, provided there is adequate support and that follow-up arrangements have been made.

Pre-discharge considerations

The decision to discharge needs to be informed by consideration of:

- Person’s functional status of care for self-e.g. meals, medication
- Person’s risk of harm to self or others
- Availability and reliability of supports e.g. adequate accommodation

Discharge and other planning

All reasonable steps must be taken to ensure that the patient, designated carer and principle care provider are:

- Consulted when planning discharge and any further treatment/ actions
- Provided with appropriate information as to follow-up care
- A discharge fax or phone call should be made to the GP and other mental health services responsible for follow up.
- A transfer of care summary that includes, medication information, community and GP referral information and follow-up appointment.