

## **WA JOINT CONSUMER ADVISORY GROUPS**

### **ISSUES PAPER SERIES PAPER ONE :**

#### **- ACCESS TO TREATMENT**

#### **“YOU HAVE TO BE SERIOUSLY ILL BEFORE YOU CAN BE TREATED”**

Contributors (in alphabetical order): Margaret Cook, Dr Ric Kellner, Sean O Connell, Michael Turnbull, Debbie Waddingham, Juanita Wilcox.

Mental health consumers have a right to treatment but unfortunately in this state it is extremely difficult to access treatment unless you are seriously unwell.

The Mental Health Consumer Advocacy Programme has much anecdotal evidence from many mental health consumers with regard to the near impossibility of accessing treatment when showing early signs of relapse.

The argument is simple. People who are aware of early signs of relapse should be treated immediately by their doctor. This saves time and money, and prevents the trauma of hospitalisation for the person.

Hospitals and clinics in the metropolitan area do not keep records of consumers who have sought treatment and have been denied access when exhibiting early signs so there is no statistical record to which you can refer.

#### **It's Logical**

It makes sense and is cost effective for people to be treated early. It causes less disruption to your life to avoid hospitalisation and people recognising early signs can be rewarded for their vigilance. But the forces are against early treatment. Doctors complain that you are wasting their time because you are not exhibiting florid symptoms, so the scenario develops where the consumer has to wait until they are demonstrating florid symptoms before they can get treatment.

This is a nonsensical situation. Recognising early signs is not attention seeking behaviour. Short sharp interventions at an early date prevents longer-term hospitalisation a few months down the track.

#### **Present Options**

Looking at the options presently open to consumers, it seems that where there is a case manager, often this person who is not a doctor is making mental state assessments in which the decision is that “ your depression is stress related” or “ you are just worrying too much” and the reports of early signs are dismissed and the case manager is effectively acting as a gate keeper for the doctor.

Consulting with a GP is not necessarily an option open to mental health consumers as GPs are not well trained in mental health and if you are finding that mental health workers are dismissive of your complaints GPs are often not in a position to help you, as GPs have reported great difficulty in accessing mental health services for their patients.

Doctors, registrars and psychiatrists, in clinics and hospitals could ameliorate the situation by making, for example, the first hour of the day for emergencies and urgencies. This would be respected by consumers to allow room for treatment of early signs so that you can get almost immediate access when it is needed. There are some doctors who are currently using this method and it appears to be working well. A more universal approach in this vein would be extremely beneficial to consumers.

The Psychiatric Emergency Team is really only available to people in a severe emergency. They are considerably under resourced with only two cars servicing the entire metropolitan area and only one staff member on duty on night shift. The service is not really appropriate for people exhibiting early signs.

The Health Direct service has a referral service for mental health consumers; it has no statistical information on people contacting the service with early signs of illness. It recommends more availability of mental health services across the board.

The problem of gaining access while exhibiting early signs is a major one. Suicidal tendencies are often neglected and it is sometimes the case that a life is lost because a person is denied access to treatment.

### **Insight is learned on both sides**

Insight is a learned phenomenon. As consumers become more familiar with their illness, they learn to recognise and can be taught recognition of early signs of onset of the illness. The crisis mentality of mental health services means that despite this recognition of early signs, access to treatment is difficult. One can only stress the common sense of treating early signs. It saves the consumer a lot of trauma and distress in their lives and it saves the mental health service a lot of money. Professionals need to remind themselves that recognition of early signs of relapse is not at the point of onset of psychosis.

For a supporting parent, the matter of access has implications for both the consumer and the child. Surely consideration of in-house services should be a priority, before crisis point has arisen. Careful planning with the consumer and the treating doctor/team could be arranged in consultation with the consumer to facilitating access to services when the consumer knows they are developing early symptoms of their illness.

### **Why is it so difficult to access treatment??**

It seems that tragedies such as suicide do not jolt the system into action. The demands of a consumer exhibiting florid symptoms are recognised but it is time that consumers who are aware of their situation have their needs met. Treatment of early signs is paramount. Consumers have reported trying to get to see their doctor and being told that the earliest appointment is three weeks away. This situation is nonsensical and the methods suggested earlier are again stressed as an attempt to bring some common sense to this. Some doctors do make themselves available to people exhibiting early signs but this is rare.

With the development of the Consumer Advisory Groups in hospitals and clinics, consumers are discussing issues such as this and informally educating each other with regard to relapse prevention and the detection of early signs. It is time that this self-education process is

formalised and the profession responds accordingly to such preventative innovation. Education about the importance of recognising early signs of the onset of mental illness has wide implications beyond making inroads into the services of hospitals and clinics. Government departments, the justice system, the education system and the general community would benefit from recognition of early signs and promotion of the idea would work towards reducing stigma associated with mental illness and bring about considerable financial savings for the community in the process. Most people are familiar with the signs that indicate a heart attack is imminent and the necessity to act early to save disastrous consequences, early signs of mental illness can be equally life threatening and if you survive, the implications for compromising your quality of life are enormous.

Let's start with doctors making provision for people who are aware of the early onset of their illness.