



VOICES

Vol. 2, No. 3, April 2017

From The Editor's Desk

Only three months ago it was predicted that 2017 would be a busy year for Flourish, and thus far it has been. New volunteers have joined the Flourish office team. Hermione's ACEIT project has been completed and officially launched at Parliament House. Flourish has begun the process of developing a strategic plan subsequent to the structural review undertaken last year. Three Flourish members were elected to the National register, and Flourish has announced it will hold a conference at the end of the year. Finally, on 22 April, two of Flourish's long term members, Amber and Darren will marry, and we collectively wish them a long and beautiful future together.

Structural Review Strategic Plan Workshop



Flourish members from across the state gathered at Campbelltown on March 17 last to begin the process of developing a strategic plan for the organisation. Represented were the three RAGs, CRS members, Board members, staff, and volunteers. Darren Turner from DHHS was also present. Our CEO, Julia Fassina, and Matthew Clement from Lifeline Tasmania, facilitated the highly successful event. Flourish wishes to thank Matthew for giving Flourish his time at short notice, and Lifeline for the use of their Hobart bus to enable those from the south to attend.



Change To Flourish Postal Address

Flourish has changed its postal address. All mail now goes to PO Box 4836, Bathurst Street Post Office, Hobart, 7000. All mail delivered to the previous address at Sandy Bay is being redirected until 3 July.

Meet The Flourish Office Team

Last year saw many changes occurring within Flourish, not least the move to new premises and changes to office staff. In past editions, VOICES has mentioned the new office, but little has been said about the dedicated office team who ensure all runs smoothly and as it should.



Julia, Flourish's Chief Executive Officer, has worked in senior management positions including the Kids in Mind Project, The Smith Family, and Partners in Recovery (PIR). In 2010 Julia was a finalist in the Telstra Business Woman of the Year (Community Sector). Julia also loves motorcycles and cats.

Flourish's Social Media and Information Technology Officer is the talented Nathan. Nathan oversees the Flourish website and Facebook page, as well as maintaining all the computers and software systems. Thanks to Nathan, Flourish's E-newsletter, VOICES, goes out on time. Nathan is interested in youth matters, likes to dabble in 'street art', and also likes cats.



Flourish's finances are expertly handled by Deb, our Finance Officer. Deb is also



responsible for ensuring Flourish's CRS consultants are reimbursed on time. When not juggling money, Deb likes to spend time on the family farm. Deb has a developing interest in the art glass known as Murano glass and loves cats.

Flourish's receptionist three days a week (Monday, Wednesday & Friday) is Dannii. She is also the office cleaner and VOICES Editor. Dannii is a passionate advocate for mental health reform and human rights. Dannii also loves cats, and fosters the old and unwanted.



The Flourish Consumer Representative Service (CRS) is co-ordinated by



Hermione, who is also Flourish's ACEIT Project Officer.

When not organising CRS positions and working on the ACEIT project, Hermione helps run the family farm. Hermione does not have cats, but does have a rabbit called Nibs.

A recent addition to the Flourish team is Julia-Ellen, who has taken on the role of Receptionist for two days a week (Tuesday & Thursday). Julia-Ellen helped set up the Flourish Health Literacy Project. After a stint in Queensland, Julia-Ellen has returned to the calm serenity of Tasmania, Flourish, and her much loved cat.



Images: Julia, Nathan, Deb, Dannii, Hermione, and Julia-Ellen

Settling-in Tip

Don't steal the doctor's pen and prescription pad; They're in league with the worst kind of poisons.

Knight, K 2008, *Postcards From The Asylum*, Pardalote Press, Lauderdale

The Mental Health Act And Chemical Restraint



Chemical restraint (CR) is perhaps one of the more confusing and controversial provisions of the 2013 Mental Health Act (the Act). More than three years since the Act became operational, clinicians, psychiatric nursing staff, as well as consumers and carers are still confused as to when the use of medication to control patient behaviour is classified as CR and when it is not. CR is defined in section 3.1 of the Act to mean: “medication given *primarily* to control a person’s behaviour, not to treat a mental illness or physical condition.” In the 1950s and 60s as new drugs became available, psychiatric institutions began using CR to control patient behaviour instead of using seclusion or mechanical restraint (MR), such as straight-jackets and shackles. When the 1996 Mental Health Act replaced the 1963 Act, only bodily restraint was allowed, which most people accepted as ‘hands on’ physical restraint. The Act did not mention CR, although MR was mentioned in the interpretation section. Meanwhile the use of MR and CR remained widespread, undocumented, and unregulated. In 2013 with new mental health legislation looming, it was decided to include CR and MR in the new Act in order that the practices could be regulated and documented, since they were being used anyway. The Chief Civil Psychiatrist (CCP) issued Standing Orders (SO.10) and Clinical Guidelines (CG.10) to assist clinicians and staff in the use of both practices, yet the confusion of when CR is not CR remains.

Some medications used to reduce symptoms of major mental illnesses have side effects. This may include sedating the patient. The use of medications which reduces or manages symptoms of diagnosed anxiety, depression, or psychosis is NOT CR. Similarly, medication that controls the behaviour of a person who has an underlying medical condition such as delirium or dementia, is NOT CR. However, when medication is intentionally given to exert control over a patient’s behaviour, then that IS CR. Adding to the confusion is that CR may involve the administration of higher than normal doses of a person’s prescribed medication; or the administration of psychotropic medication.

Acute agitation manifests in upwards of 25 per cent of emergency psychiatric presentations, creating a high risk of harm to the patient and others. Medications such as benzodiazepines and anti-psychotics, either alone or in combination, are often used to treat acute agitation in order to minimise the risk of injury, and to stabilise the patient. To minimise ambiguity and reduce the risk of violation of patient rights as defined in the Act, the treatment of acute agitation syndromes should follow Standing Orders and Clinical Guidelines as prescribed for CR by the CCP.

Sources: Mental Health Act 1963; Mental Health Act 1996; Mental Health Act 2013; CCP Standing Order No. 10; Clinical Guideline No.10. Image: DHHS Standing Order No 10.

ACEIT Finally Launched!

Flourish's Project Officer, Hermione, has been busy over the past 12 months. She has been developing an Active Consumer Engagement Implementation Tool (ACEIT) for use in community service organisations. Finally, on March 30, everything came together when ACEIT was formally launched at Parliament House by Rosemary Boote. Some 50 people attended the launch, which was sponsored by the Minister for Health, Michael Ferguson, for which Flourish is grateful.

ACEIT is a requirement under the National Standards for Mental Health Services, in particular Standard 3. These Standards were developed by the federal government in 2006 and later revised in 2010. Using ACEIT will help staff and consumers assess progress in implementing Standard 3 with respect to consumer engagement. Standard 3 is summarised as: Consumers and carers are actively involved in the development, planning, delivery, and evaluation of services. Many organisation's funding agreements include compliance with the standard.

A Poetic Prompt

As readers may be aware, the VOICES Editor has pleaded endlessly for contributions, including poetry. When one is unwell, it is not uncommon to resort to poetry to express one's anguish. The end product is sometimes dark and morose. However, when one is well, the poetry can be flippant, joyous and a pleasure to read, so as a prompt to all you secret poets, a poem follows, which it is hoped will prompt others.

Chef's Special

'Chef's Special' it said, the sign above the Republic's Bar,
"Stir-fried scallops in spicy sauce" I said, ending with a "ta".
Squat beads of milky white flesh tinged with a pale yellow,
Rose coloured roes gamely defy the chef's irate bellow.
Breathe deep the salty scent of freshly opened scallop shell,
Once a living organism below the Channel's gentle swell.
My little translucent babies are gently fed into the frying pan,
And lightly tossed in sesame oil, oh it all sounds so grand.
Now they begin to dance and twirl around the pan so hot,
In company with ginger, soy sauce, slices of garlic and shallot.
Blue flames sprout and dance around the pan as if crying out,
Whilst the chef throws a tantrum and begins to stomp and shout.
My delightful babies are set before me and I do so begin to drool,
In anticipation of this succulence not taught at my old cookery school.



Dannii

Image: Dreamstime.com

Pensioner Power



In Tasmania, there are more than 100,000 people who are on aged or disability pensions. The potential power these combined voices hold in our communities, and in Parliament through our elected representatives, should not be underestimated. The Sunday Tasmanian, with support from TasCOSS and COTA, is surveying aged and disability pensioners about their experiences while living on the pension. As the Sunday Tasmanian newspaper story of 5 March last reported: “[Our State] has the highest proportion of pensioners and is ageing faster than anywhere else in the country, potentially creating a voting bloc capable of swinging elections, and ... Their voice is getting louder.”

Council on the Ageing’s Sue Leitch said, “The baby boomers who lived through peace and love and rebellion against wars, the Keith Richards of the world, are all getting older and they will make their voice heard.”

It would be appreciated if you could distribute [the survey link](#) to your staff, volunteers, clients, and your various networks, to ensure the voices of these Tasmanians are heard loud and clear by all. Please contact Kim Goodes, Tasmanian Council of Social Services (TasCOSS), P O Box 1126, Sandy Bay, TAS, 7006, if you have any queries.

[Fill out the survey now.](#)

New Mental Health Services For Young Tasmanians

New services for young Tasmanians with a mental illness have been announced as part of an Australian Government initiative to improve child and adolescent mental health care. Primary Health Tasmania’s General Manager, Mark Broxton, said Cornerstone Youth Services and Life Without Barriers would support 12 to 25-year-olds at risk of complex and severe mental illness. Cornerstone Youth Services will support young people in north and north west Tasmania, while Life Without Barriers covers the south. Mr. Broxton said consultation with mental health service providers and carers and consumers had highlighted priorities for improving the mental wellbeing of young people and those who support them.

“There is a particular service gap for young people who aren’t eligible to access services supporting the most severe forms of mental illness, but whose needs aren’t being met by existing services for people with mild to moderate illness. Cornerstone Youth Services and Life Without Barriers will help bridge this gap. Primary Health Tasmania will be working closely with these organisations to learn how best to support young people with severe and complex mental illness,” Mr. Broxton said. More information is available on the Primary Health Tasmania website at: www.primaryhealthtas.com.au/services-young-people-severe-complex-mental-illness

Congratulations!

From everyone at Flourish, we would like to congratulate the 60 consumers from across Australia who were selected to represent us on the national register. Flourish members Jan, Monica and Darren J informed us that they are very excited to have been selected to join this very important representative group. So you may ask what is this 'National Register'?

The National Register is a pool of trained mental health consumer and carer representatives who work at the national level to provide a strong consumer and carer voice in the mental health sector. Members of the Register use their lived experience, knowledge of the mental health system, and communication skills, to advocate and promote the issues and concerns of mental health consumers and carers. Representatives are expected to actively participate in the program, keep up to date with current trends and issues in the sector, and provide reports on representative activities. The National Register was established in 2007 and is an ongoing project of Mental Health Australia. The program is funded by the Australian Department of Health.

Each year, Mental Health Australia hosts an Annual Issues and Opportunities Workshop for members of the Register and National Mental Health Consumer & Carer Forum (NMHCCF) members. For more information on the NMHCCF, please visit <https://nmhccf.org.au/>

These two-day workshops aim to further develop the representative skills of mental health consumers and carers already participating in national policy initiatives. In particular, the workshops are designed to develop representatives' advocacy, policy development and leadership skills. They also provide an opportunity to discuss national issues important to mental health consumers and carers, as well as network and share representative experiences.

Darren J

Source: <https://mhaustralia.org/report/national-register-mental-health-consumers-and-carers>

Image: Fotolia.com

Suicide Prevention Australia

Last month, Suicide Prevention Australia (SPA) hosted an opportunity for the community sector and members of the public who have been personally impacted by suicide to contribute to the 2025 Strategic Framework for Suicide Prevention.

Suicide is a complex social problem, however too often it is simplified to being the result of mental illness. The complexity of suicide is a serious public health issue and must be addressed by investing in a plan that delivers to regional Australia and provides a person-centred care, coupled with national leadership and accountability. Suicide Prevention Australia CEO, Sue Murray, said of the State-based consultation, “We have seen unprecedented political support for suicide prevention in recent months, most notably consultation on the Fifth National Mental Health Plan. We want to ensure community sector voices across the country are heard when it comes to implementation of reforms.”

Overview of the consultation process

In February 2017, a National Coalition for Suicide Prevention workshop, convened by Suicide Prevention Australia (SPA), initiated discussion on a 2025 framework for suicide prevention. This builds on the Government commitment in the Fifth National Mental Health Plan Consultation Draft 2016, “developing a whole-of-government national suicide prevention plan”. [Read the SPA submission re feedback on the Fifth Plan.](#) The discussion at the workshop outlined a proposed strategic framework to lead to a reduction in the national suicide rate in Australia. SPA is now developing this further through consultations over the next three months. Consultation will involve the National Coalition for Suicide Prevention, SPA organisational and associate members, leading associations in mental health and suicide prevention, SPA’s national Lived Experience Network, the Federal Department of Health, Primary Health Networks, and leading researchers in the field. We will also be sending out an online survey in April 2017 as part of the consultation process.



About Suicide Prevention Australia (SPA)

SPA provides national leadership for the suicide prevention sector in Australia. SPA works collaboratively to develop a community that knows how to ask for help and how to give help. As the lead agency of the National Suicide Prevention Coalition, we build and facilitate partnerships to change attitudes and harness the voices of professionals and those with lived experience of suicide attempts and suicide. www.suicidepreventionaust.org

Rethink Mental Health Update



Work continues across a broad range of initiatives under the Rethink project. An Expression of Interest has been released to Community Mental Health Teams around the state to gauge their interest in, and commitment to, integrating peer workers into their multidisciplinary teams. We are aiming for the first peer worker positions to commence in 2017.

Work has commenced to introduce the Safe Wards model. Kim Barnes is leading this work with inpatient teams around the state.

A service model to establish early referral pathways following a suicide attempt or self-harm has been developed. This is a new service to support people presenting to health services including public hospital Emergency Departments, GPs or public mental health services, following a suicide attempt. The service will provide intensive psychosocial support and follow-up to people within 48 hours of referral. It is for young people from 15 years through to older adults (65-years plus), and will be provided on a state-wide basis. Anglicare Tasmania has been engaged to provide the service, which will start in June.

Development of a framework to guide the implementation of the Your Experience of Service (YES) national survey to ensure a nationally consistent collection and reporting of consumer's perspectives about the health care they receive is identified in the Plan. To learn more about the YES survey please visit the Mental Health Services Australia website for more information.

The Rethink Plan identifies pursuing opportunities to utilise the arts to support and promote mental health for Tasmanians. An Arts and Mental Health Forum was held in February to bring together stakeholders from both the Arts and Mental Health sectors to discuss the benefits of and opportunities for creativity to enhance the health and wellbeing of Tasmanians. Following on from the Forum, planning is underway to develop a strategy that links with existing events to continue developing and strengthening partnerships between the arts community and health services. The strategy will look at increasing the accessibility of arts and creative activities and events for people with mental ill health.

Source: Mental Health, Alcohol and Drug Directorate

If any story in this newsletter causes you distress and you need to talk to someone, please contact any of the following: Lifeline: 131114, Beyondblue: 1300 22 4636, Suicide Call Back Service: 1300 659 467, SANE Helpline: 180018 7263.

Comments And Submissions

Feedback is always welcome. This can be done via SharePoint, e-mail, phone, or mail. Newsletter content does not necessarily reflect the views of the Flourish Board or staff. Flourish is not responsible for, and refutes all liability for, damages of any kind arising out of use, reference to, or reliance on any information contained within the newsletter. There is no guarantee the information provided in the newsletter is correct, complete, or up-to-date. Although links may be provided to Internet resources, including websites, Flourish is not responsible for the accuracy or content of information contained in these sites.

Newsletter guidelines

Submissions should be neatly written or typed articles. A maximum of 500 words per story applies. More than one article per person is welcome, but dependent on space and other restrictions, publication is at the editor's discretion. The editor reserves the right to edit spelling, punctuation, and if needed, grammar. Contributors may be anonymous, use only their first name, or use their entire name. If reporting on Flourish project/policy committee involvement, it is the responsibility of the author to check with the relevant organisation and/or the Flourish CEO, to ensure confidentiality is not being breached.

Deadline for submissions for Vol. 2 No. 4 May 2017 is 28 April

Flourish Membership

Membership of Flourish is free and open to all Tasmanian's who have a lived experience of mental illness and/or have experience in and an understanding of mental health issues. Being a member of Flourish can provide you with information about mental health through our newsletter, website, and forums where people with an interest in mental health can meet and share their experiences and ideas. Flourish has four Regional Advisory Groups in the North West, the West Coast, the North, and the South, which provide a forum for consumers to have input into the way mental health services are delivered. To apply for membership, complete the attached form, and agree to the Flourish Code of Conduct. If you would like to discuss Flourish membership in more detail, please phone our office on 03 6223 1952 or email admin@flourishtas.org.au

Flourish Code of Conduct

The Code of Conduct guides Flourish members. The term 'member' refers to employees, Board members, volunteers, Regional Advisory Group members, and work-experience students of Flourish. Flourish seeks best practice in management and governance. Flourish expects a high standard of behaviour from members and there is an expectation that members will conduct themselves in a professional manner. This code underpins other policies, e.g., Anti-Discrimination Act. The following principles form the Code of Conduct:

Members work in a professional manner, adhering to relevant professional and organization codes' of ethics and working with respect, fairness and integrity at all times.

Workplace Health and Safety and the Anti- Discrimination Act are adhered to.

Flourish policy and procedures are adhered to, such as Anti-Discrimination and Harassment, Complaints, Privacy and Confidentiality.

Members are respectful of colleagues and work to resolve conflict in an appropriate manner.

Members conduct themselves professionally at all times and do not act in a manner that might jeopardise the safety of others or themselves or bring the name of Flourish into disrepute.

Members show due care when using all assets and property belonging to Flourish.

Members are aware of diversity in the workplace and are respectful of others.

Members are aware of harassment and bullying issues, discrimination and sexual harassment.

The Code of Conduct mandates the need for appropriate working relationships and the resolution of conflict in a safe and respectful manner. Where conflict is not resolvable members should refer to the Grievance Policy or the Bullying and Harassment policy.

I understand and agree to abide by the Flourish Code of Conduct.

Member's name:

Signature:

Date:

Flourish Membership Application Form

First Name:

Last Name:

Gender (circle): Male / Female / Other

Age (circle): 18-25, 26-35, 36-45, 46-55, 56-65, 66+

Address:

Phone:

Mobile:

Email:

Preferred method of contact:

Do you have any special needs, e.g. mobility?

I agree to Flourish disclosing my contact details to other members for the purposes of contacting me about relevant matters. YES / NO

By signing this application for membership, you have read and agree to abide by the Flourish Code of Conduct

Signature of applicant:

OFFICE USE ONLY

Application processed (date)

Information on register (date)

Letter sent to applicant (date)