The adult mental health service system in Victoria

**General Information**
- Public and private, government and non-government, hospital and community elements, comprise the Victorian Mental Health System
- The state government is the major provider of acute services for people with serious mental illness
- The Mental Health Branch of the Department of Human Services (DHS) oversees provision of public mental health services
- Services are primarily delivered by Area Mental Health Services within the state (13 metropolitan areas and eight rural areas). Each region provides three types or streams of mental health service:
  - Child and Adolescent Mental Health Services (0–18 years)
  - Adult Mental Health Services (16–64 years)
  - Aged Persons Mental Health Services (65+ years)
- Within each stream there are:
  - Hospital Inpatient Services
  - Community Mental Health Services
  - Residential services for the aged
- There is also a number of statewide, regional and specialist services, for example, the Mother and Baby Units, Forensic Psychiatry, Dual Diagnosis Services, Personality Disorder Services (Spectrum)
- Psychiatric Disability Rehabilitation Support Services (PDRSS’s) are also provided in each region.

This fact sheet will focus on the Adult Mental Health aspect of the system.

**Adult Mental Health Services**

**Hospital Inpatient Services**
- Acute Inpatient Services (wards) provide voluntary and involuntary short-term care during an acute phase of mental illness until sufficient recovery allows effective treatment in a community-based setting. Units are located within acute general hospitals.
- Secure/Extended Care Inpatient Services provide a safe, supportive place for people with a serious mental illness whose behaviour may put them or others at risk. Their purpose is to provide residential intensive treatment and care to a person who has unremitting and severe symptoms which inhibit their capacity to live in the community. These facilities can manage people on an involuntary basis.

**Community-based services and teams**
- Crisis Assessment and Treatment Teams (CATT) provide a 24 hour clinical and rehabilitation service for people residing in the community
- Community Mental Health Centres (also called Continuing Care, Clinical and Consultancy Services) provide assessment, treatment, consultancy, continuing care and case management
- Mobile Support and Treatment (MST) Provide intensive long-term support, assisting many people in special residential services and boarding homes
- Community Care Units (CCUs) provide residential services for people with serious mental illness and major psychosocial disabilities. They also assist in preparation for community living

**Private psychiatric services**
- Private GPs are often the first point of contact for people with mental health problems. GPs may be more accessible than mental health specialists, likely to know about local support services and able to offer ongoing general medical and psychiatric treatment
- People with mental illness treated by Community Mental Health Services will most often be discharged to the care of GPs in their local community as soon as is practically possible. This makes having a relationship with a good GP very important
- GPs who work out of Community Health Centres work in multidisciplinary teams and are often well placed to work with people with mental health issues
• The most common way of seeing a private psychiatrist is through a referral from a GP, which allows the Medicare rebate to be claimed. (fees vary, and some psychiatrists bulk bill.) Especially in rural areas, private psychiatrists may not be available. 
• Private psychiatrists mainly provide outpatient services from their consulting rooms or inpatient services to private hospitals. They may have specialist interests (e.g., working with particular age groups or disorders, and specific therapies). 
• Private psychiatrists and GPs may work together with case managers and others in developing a management plan. 
• The private sector incorporates private psychiatric hospitals, but these generally exist only in larger population centres, and they do not take people who require involuntary admission. 
• Better access to Mental Health Care Initiatives - is federally funded and aims to increase community access to general practitioners, psychiatrists, clinical psychologists and other allied mental health professionals for consumers. 

Psychiatric Disability Rehabilitation and Support Services (PDRSS’s) 
A range of services provides employment placement, support, information, day and residential programs and family respite. Some are run by not for profit organisations with government funding. 

• Psychosocial Rehabilitation Day Programs assist people with severe psychiatric disabilities to improve their quality of life, participate in everyday activities and achieve an optimal level of independent functioning in the community. This objective is achieved through the development of social and living skills in a group context, through centre-based and community access programs. 
• Home Based Outreach provides support to clients living in their own homes, either a private dwelling, rooming house, Supported Residential Service or an Office of Housing house, unit or flat. Support in the resident’s home focuses on everyday life, including budgeting, cooking, caring for oneself and one’s home and relating to friends, family, neighbours and local businesses. 
• Respite provides a short term change in environment for a client and a break for carers. It includes both formal and informal psychosocial rehabilitation components. It may involve day activities (including social and recreational), in-home support, holidays and adventure activities and residential components. 
• Residential Rehabilitation provides intensive psychosocial rehabilitation and support in group accommodation prior to residents living independently. The emphasis is on developing or regaining skills to deal with daily living activities. Emphasis is placed on developing a resident’s confidence to begin or continue schooling, training or employment, as well as supporting positive contact with family and friends. 

PARC aims to assist in averting acute inpatient admissions and to facilitate earlier discharge from inpatient units by providing clinical treatment and short-term residential support. 

• Employment services of both state and commonwealth departments provide employment placement and support to people with a mental illness, including Vocational Rehabilitation Services, Job Network and Disability Employment Network (DEN). DEN specialises in supported employment.

Useful references 
Mental Illness Fellowship of Australia www.mifa.org.au 
Mental Illness Fellowship Victoria www.mifellowship.org 
Mental Health Services Website (Vic) www.health.vic.gov.au/mentalhealth 
National Alliance of the Mentally Ill (NAMI) (USA) www.nami.org 
Mental Health Council of Australia www.mhca.com.au 
SANE Australia www.sane.org 
Beyond Blue www.beyondblue.org.au

Mental Illness Fellowship of Australia fact sheets 
Mental health legal framework in Victoria
What can friends and family do to help a person experiencing mental illness?
Family and carer supports and services

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