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How \$180m can fix mental health crisis

EXCLUSIVE

BEN PIKE

MENTALLY ill people are being forced to go to hospital emergency departments because the state government is not spending enough money in the right areas, experts claim.

A new KPMG report has found the state government spends the lowest proportion on community-managed mental healthcare in the country — 6.8 per cent compared to an average of 13.9 per cent across the country.

This means people with mental health problems are forced to go to hospital emergency departments when they are in crisis.

There has been a 76 per cent increase in mental health related emergency department presentations between 2005 and 2017.

Mental Health Co-ordinating Council CEO Carmel Tebbutt, whose organisation funded the report, said this figure could be reduced if services reached out to people in the community before they hit rock bottom.

“It is not good for people with

mental health conditions to have to wait until they get to crises before they can get access to services,” the former Labor deputy premier and health minister (pictured) said. “If it was cancer you wouldn’t have people being told: ‘You’ll have to wait, we can’t provide the services you need.’”

Ms Tebbutt’s solution is an additional \$180 million per year to expand supported living services for 5000 people who are not accessing mental health services. She said it would save \$1.20 for each \$1 invested.

There would also be \$88 million for facilities that help people transition from acute psychiatric wards to the community, known as step-up/step-down facilities,” she said. The key element is also a “headspace for adults” service to make it easier to access mental health care.

Headspace is a national youth mental health service that allows 12-25-year-olds to offer a range of mental health services via more

than 100 shopfront locations nationwide. The plan is supported by University of Melbourne Professor Patrick McGorry, executive director of youth mental health organisation Orygen and the 2010 Australian of the Year. “People are swarming into EDs with mental illness but it is not the place for them,” Prof McGorry said. “It’s just Band-Aid stuff at the moment.”

A Western Sydney University report published earlier this year found there was inadequate follow-up care for suicidal people who arrive at the area’s emergency departments. Areas around Parramatta, Mount Druitt, Carlingford, Rouse Hill and Epping were the most affected.

A NSW Health spokeswoman said spending on community-based mental health services increased 15.4 per cent between 2011 and 2016.

“NSW is one of the

only jurisdictions to retain its housing support programs and did not include these as part of its contribution to the NDIS,” she said. “NSW Government continues to work in partnership with community managed organisations and Primary Health Networks to better integrate service provision.”

Schizophrenia and panic disorder sufferer Daniel Singh has stayed out of hospital for the past two years.

It’s thanks to activities such as going fishing in Sydney Harbour and the phone calls from Flourish Australia support worker Ciaran Mahoney.

At his lowest points the 37-year-old visited emergency departments more than a dozen times.

“I didn’t tell them the truth about what my problems were because I was scared that they would not help me,” he said. “I am honest with Ciaran because I want to face the real things in life without any problems.”

Mr Singh said if he had more support when he left hospital in the past, he wouldn’t have been forced to go back so often. Mr Mahoney said Flourish Australia ensures people don’t get to the point of crisis.



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Daniel Singh (left) has stayed out of hospitals for the past two years because of the care from Flourish Australia support worker Ciaran Mahony. Picture: Sam Ruttyn

