



Family / Carer Participation in Mental Health Care

Definition of Family / Carer

Family: A family is two or more people who regard themselves as a family and who perform some of the functions that families typically perform. These may or may not be related by blood or marriage and may or may not usually live together. *Families may vary across cultures; in relation to age and gender; and are not negated by geographic distance or isolation.*

Carer: A carer is a person who provides significant unpaid care and support to a person with a mental health issue/s.

Rationale

1. It is known that mental health outcomes are improved when there is full sharing of information in partnership between consumers, families/carers and clinicians.
2. Townsville Mental Health Service will encourage and enhance the consumer's participation in assessment, planning and delivery of their clinical care.
3. Townsville Mental Health Service will encourage and enhance family/carers' participation in the assessment, planning and delivery of clinical services for their Consumers.
4. For this purpose Mental Health Services will *automatically encourage* information to be shared fully by families/carers, consumers and clinicians with the consent of each party. To achieve this no carer or consumer will lose existing rights. This process will be subject to regular review.
5. It is recognised that families need information to understand the issues that surround mental illness and its treatment and their caring role and options.

Family / Carer Rights and Responsibilities in Sharing and Exchanging Information

1. To give information to assist the clinician and aid diagnosis, assessment and understanding of the role of the family/carers in the consumer's life.
2. To receive information from the treating team about diagnosis and strengths of the consumer. To receive information about strategies that would help the consumer and strategies that would help the carers.
3. Participate in the development of the Individual Service Plan and where appropriate, be a signatory and/or be involved in the delivery.
4. Participate in a regular feedback process about the progress of the consumer and the Individual Service Plan.
5. The level of information shared may vary from time to time according to individual situations and will be subject to regular review.

Standards

1. Family/carer and consumer participation depends on being an open process. Respect, discretion and confidentiality are maintained within consumer / carer / family / clinician relationships.
2. This applies to all consumers, voluntary or involuntary.
3. Everybody has the right to support and advocacy. Involuntary consumers can nominate an Allied Person (who may or may not be their family/carer member) under the Mental Health Act 2000. There is a separate procedure for this. Voluntary consumers are encouraged to identify someone who can fulfil a similar role for them.
4. Consumers and family/carers reserve the right not to participate and reserve the right for some information not to be shared.
5. Family/carers have the right to referral to appropriate organisations to receive information, education and support around issues of caring.

Quality Assurance Standards of the Mental Health Service including Acute Inpatient Unit

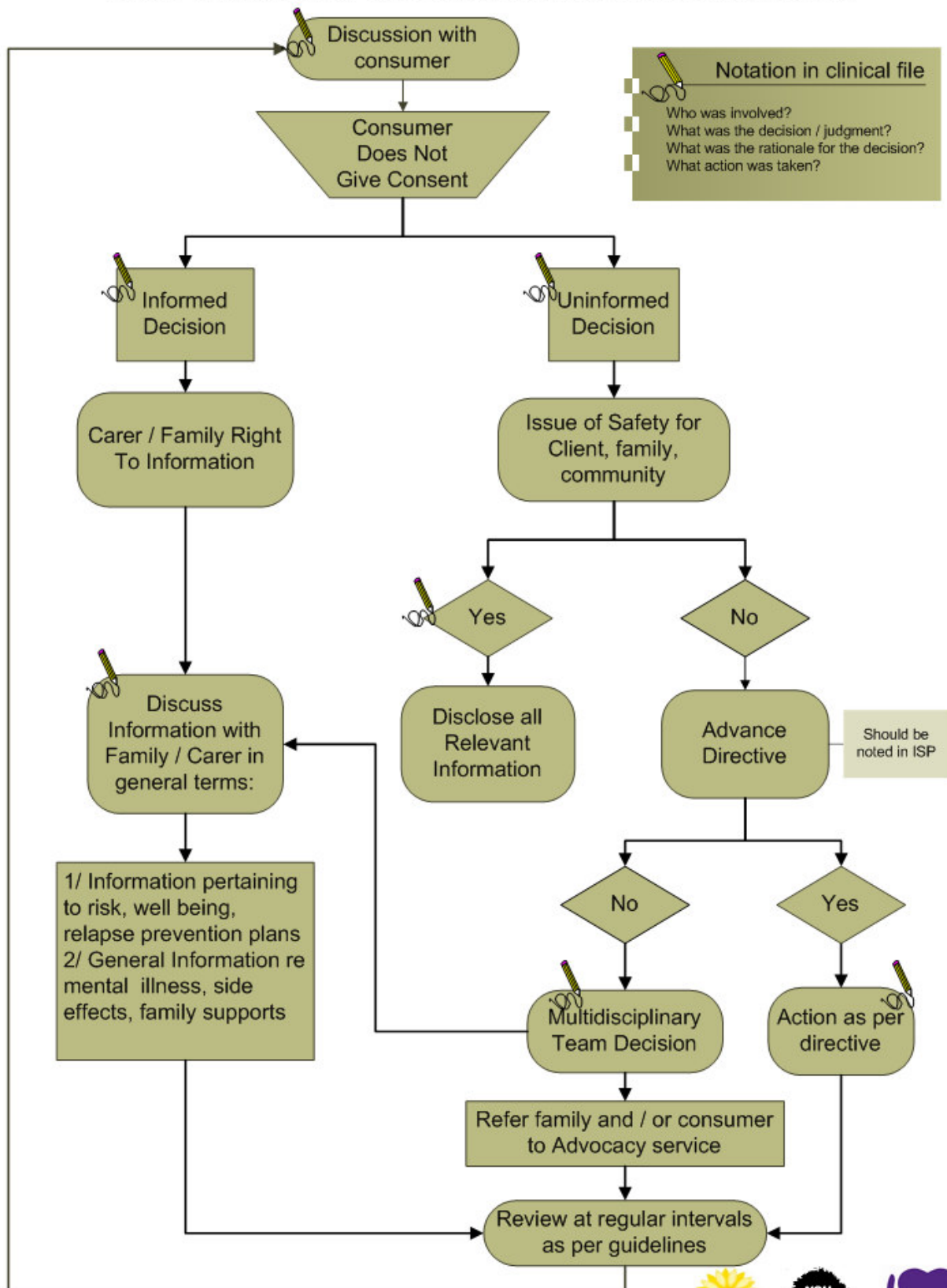
(a) For Inpatient Admission

1. Family/carer involvement in information sharing and exchange of information at point of entry, or as soon as practically possible, but within three (3) days.
2. Families/carers to receive information about diagnosis, strengths and management strategies within 5 days.
3. Discharge planning process and participation in Individual Service Plan (ISP) to begin within one week.
4. Feedback *and review* weekly while an in-patient, unless otherwise arranged.

(b) Community Treatment

1. Family/carer involvement in information sharing and exchange of information (at point of entry) or by the end of the second interview or within two weeks of beginning case management.
2. Family/carer to receive information about diagnosis, strengths and management strategies within one month.
3. Discharge planning process and participation in Individual Service Plan (ISP) to begin within one month.
4. Feedback and review three (3) monthly unless otherwise agreed.

Family / Carer Practice Standards Guidelines: Where the consumer does not consent to information sharing

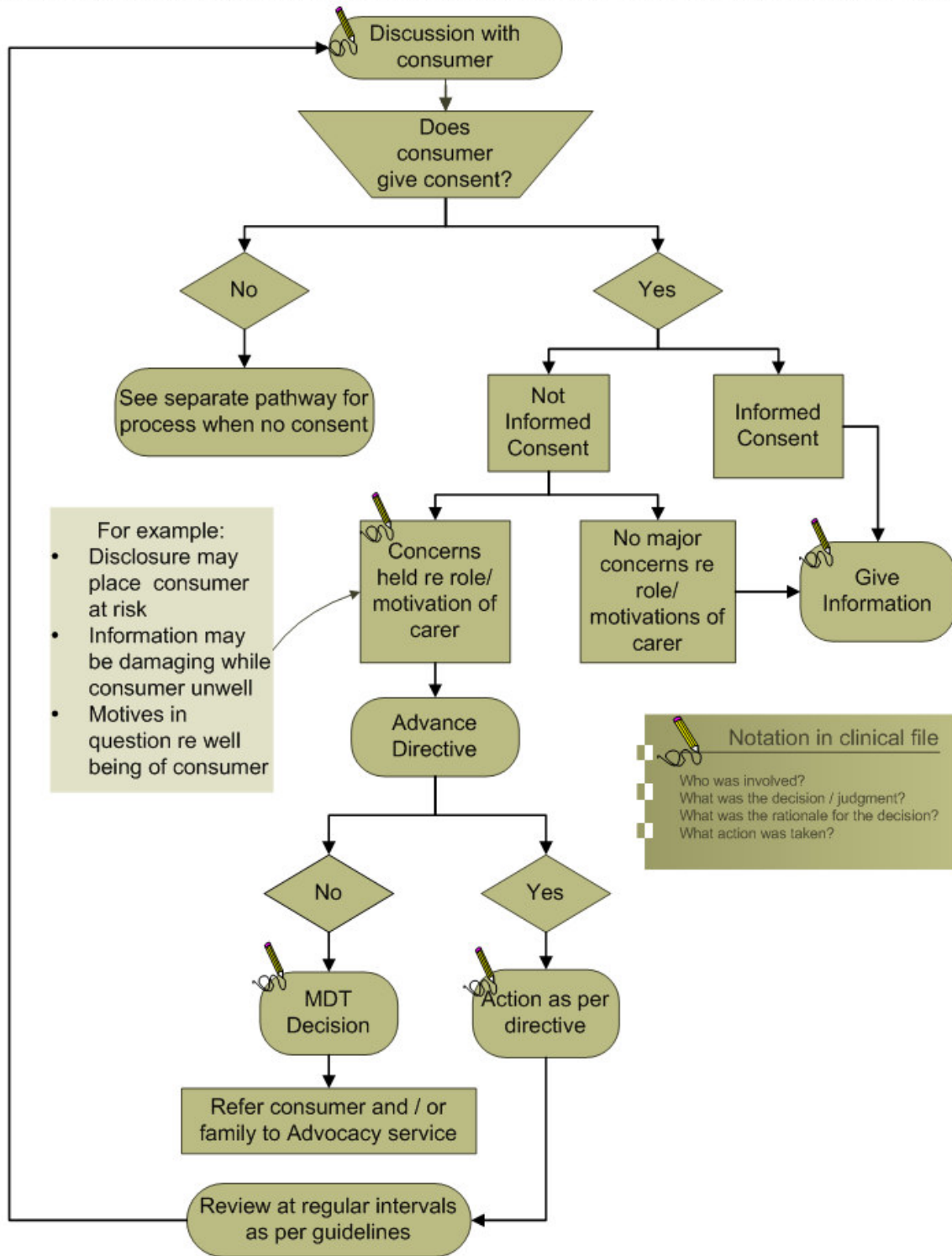


Note: Please see Standards Document for Definition of Family / Carer Member



Family / Carer Participation Guidelines:

Where consent is given but concerns exist in regards carer role/motivation and/or consumer capacity)



Note: Please see Carer Standards Document for Definition of Carer/ Family Member

