

SENATE SELECT COMMITTEE ON MENTAL HEALTH INQUIRY SUBMISSION of Douglas L. McIver

ATTACHMENT D

Mental Health Statement of Rights and Responsibilities

In March 1991, the Australian Health Ministers adopted a report compiled by the Mental Health Consumers Outcomes Task Force, titled the *Mental Health statement of rights and responsibilities* (AGPS, Canberra 1991). It became a part of the National Mental Health Policy and Plan, and spelt out the rights and responsibilities of consumers.

Some of the consumer rights include:

- . the right to appropriate and comprehensive information, education and training about their mental health problem or mental disorder, treatment and services available to meet their needs (page 1)
- . the right to timely and high quality treatment (p1)
- . the right to interact with health care providers, particularly in decision making regarding treatment, care and rehabilitation (p1)
- . to right to participate as far as possible in reasonable treatment and rehabilitation processes (p2)
- . the right to expect that recognized education and assistance programs covering mental health problems and mental disorders will be provided for primary health care workers to help them understand, manage, and where appropriate, refer people with mental health problems or mental disorders (p5)
- . the right to expect that hospital and community mental health services will be part of an integrated network to ensure continuity of care (p6)
- . the right to expect mental health services will be integrated with general health services so as to provide comprehensive health care, including access to specialist medical services (p6)
- . the right to have possible mental health problems or mental disorders assessed, diagnosed, and, where appropriate, treated and regularly reviewed in accordance with professionally accepted standards (p6)
- . the right to treatment or be given reasons for refusal of treatment and referral to alternative services (p7)
- . the right to a co-ordinated and ongoing range of adequately resourced public, private and non-government care, treatment, rehabilitation, information and support services (p7)
- . the right to have treatment carried out within a co-ordinated and multi-disciplinary framework appropriate to his or her health and rehabilitation needs and the need to protect the safety of themselves and others (p7)
- . the right to obtain treatment at an early stage of their illness to minimise the likelihood of involuntary admission to a treatment program (p7)
- . the right to seek a second opinion (p7)
- . the right to mental health services which are resourced, organized and administered to provide care as set out in the Mental Health statement of rights and responsibilities document (p11)
- . the right to have explicit standards set for all sectors of service delivery and that such standards should have operational criteria by which they can be assessed (p11)

. the right to access mechanisms established for the development and regular review of standards. Such mechanisms should be used for the evaluation of services, including both the process of service provision and the outcome of the treatment (p11)

. the right mental health services which comply with standards of accountability to consumers, the community and governments (p11)

. the right to expect governments to ensure adequate levels of professionally trained and qualified staff in mental health services (p12)

. the right to expect services will ensure a capacity for, and commitment to, the maintenance and further development of staff knowledge and skills (p12).

The Mental Health statement of rights and responsibilities also spelt out the rights of carers and advocates, and it included the following statement:

. Carers and advocates have right to seek further opinions regarding the diagnosis and care of the consumer (p18).

And it was stated that in providing services, **service providers have the right to:**

. acknowledgement of their professional qualifications and capabilities (p19)

. co-operation as far as possible in reasonable treatment processes (p19)

. work in optimal conditions of service delivery and employment including the right to ongoing training and a safe and supportive work environment (p19)

The service providers also have a responsibility to:

. provide the highest quality service to the consumers, carers and advocates in line with their training and recognized professional practice (p20)

. ensure their knowledge base is in line with current trends in care and treatment (p20).

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