

Mr. Sharn Hunkin

20<sup>th</sup> May 2005

To: Committee Secretary  
Senate Select Committee on Mental Health  
Department of the Senate  
Parliament House  
Canberra ACT 2600

Dear Mental Health Committee.

I have been very concerned for the past decade or so over the decline and often denial by powers to be about the lack of mental health facilities in my state of NSW and in Australia generally.

I have been a Psychiatric nurse since starting nursing at Morisset Hospital in 1968. I registered as a psychiatric nurse in 1972 and have been involved in all aspects of this branch of nursing for over 30 years.

During this period of time I have witnessed the deliberate and programmed destruction of public assets (ie Morisset Hospitals infrastructure) used to nurse the sick within the Morisset Hospital site. A once proud institution and gathered expertise has been disbanded and decimated.

In the 1970's there was an extremely good and cost effective system of mental health treatment and care of the long term ill within the fifth schedule system as it was then and especially at Morisset

Morisset hospital had the enviable reputation as the hospital with the greatest degree of staff patient relationships that aided the ill in their rehabilitation. This has been born out in many interdepartmental reviews over the years.

The system began to decline with the new push to empty the asylums of institutionalized patients. The word asylum became a dirty word; no longer was it a place of sanctuary or refuge by those in the community that needed solace and somewhere to quietly recover from a myriad of psychological condition created by circumstance and the environment of modern life.

The powers to be seem to feel that these people with no political clout could be emptied into the so-called "community" and virtually fend for themselves. This is precisely the pressure that put many of them into the hospital system in the first place. The patient's inability to cope with everyday life and to recognize fact from fiction resulted in the illness to begin with.

It seems to me to another example of someone in authority with an agenda putting their careers ahead of what is practical and best for those in their charge. The new order appeared to offer a lot but there were never the resources to follow up and look after those most at risk outside the hospital umbrella.

We now see the result of this ill considered push to empty the treatment centers with many of the former patients and the people that have never had the benefit of the old system now either on the streets as vagrants, or in custodial care (goal) or in what remains of the private sectors efforts to fill the gaps made by the restructuring of institutional care. Ie non-governmental boarding houses.

The states in the 1970 had an agreement with the federal government to grant all patients invalid pensions. This gave the states valuable resources to fund an old antiquated system. It also gave the states the means to divest themselves of the responsibility of looking after those most in need of help over the long term.

Particularly as in the case at Morisset hospital public assets have been allowed and often encouraged to degrade into a state of disrepair so as to negate the viability of returning to the system.

I understand that nothing in life is static and change is the norm but the development of acute psychiatric care in tandem with the general hospital system is not only unfair on the patients suffering mental illness but also unfair on the sick public who need care and quiet when in the general hospital system.

Most mental illnesses are very long term and require ongoing treatment and support as opposed to medical conditions in the hospital system that usually require a short duration of intense treatment in the general system.

The mentally ill could ask for nothing better then the vast open areas on offer at the old site at Morisset with lakes and park like conditions to sooth the soul. This is not possible in a stark wing of a modern general hospital!

Psychiatric nursing is a specialist branch of nursing requiring very special training and empathy on behalf of those involved in the ongoing treatment of those in their care.

The ranks of the psychiatric nurse are growing very thin with little or no training over the past 20 years. This will have dire consequences in a few years when that pool of expertise is retired and out of the work force. The new university training regime such as it is does not fully train nurses like on the job training does.

The results that I have witnessed over the past 20 years has seen many fine young people come through the new training system with a wealth of knowledge but very lacking in any hands on abilities to the degree that they then need 12 months practical training in the ward situation before they are a competent member of the nursing team.

The basic problems that I see after many years in the mental health field are:-

- 1 Trained staff shortages to meet the needs of mentally ill persons. This means a new emphasis on psychiatric nurse training.
- 2 A need for government and those responsible for psychiatric services to be aware that there is a need out there for long term (dare I say) Institutional care.
- 3 Acute illnesses require specialist treatments and with the changes to the mental health system of late it is virtually impossible to find any acute beds for mental illness accommodation. Those that are available are small units attached to a general hospital in less than ideal environments to facilitate rational treatment regimes.

I feel that there is some hope of rectifying the deficiencies of the present and a return to some soundly based treatment but it will take time and resources.

The very fact that at last there is a committee looking into mental health within Australia is a step forward.

One can only hope that government will not be too long in coming to some sensible decisions of what is to be done to remedy the shambles we have had to work with over the past 20 years.

Australia is a first world nation, of health system is of world standard but mental health has been almost non-existent now for many years and desperately needs attention.

I look forward to seeing some results from the committee's deliberations in the near future.

Thank you for the opportunity to comment.

Yours sincerely,

Sharn Hunkin (Mr)