

Submission to the Productivity Commission's Final Review of the National Mental Health and Suicide Prevention Agreement

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1. Introduction

As a carer for a mental health patient, I am deeply invested in improving Australia's mental health and suicide prevention systems. However, my experience has highlighted systemic gaps in **information accessibility for carers**, which hinder our ability to provide effective support. This submission focuses on addressing these gaps and proposes actionable solutions to ensure carers are informed, empowered, and included in policy frameworks.

2. Key Issues Faced by Carers

Lack of Centralised Information

- Carers often struggle to access clear, up-to-date information about patient rights, treatment options, and available support services.
- Example: Navigating crisis care protocols or understanding medication management plans is challenging without structured guidance.

Insufficient Communication from Healthcare Providers

- Many carers report being excluded from critical discussions about the patient's care plan, despite their frontline role.

Limited Access to Training and Resources

- Carers lack training on mental health first aid, de-escalation techniques, or trauma-informed care, leaving them unprepared for complex situations.

Emotional and Systemic Isolation

- Carers often feel unsupported, with no formal channels to voice concerns or seek help, leading to burnout.
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3. Recommendations

A. Establish a National Carer Information Portal

- Create a centralized, government-funded online platform with:
 - Step-by-step guides on navigating mental health systems (e.g., NDIS, hospital admissions).
 - Clear explanations of patient rights, treatment options, and crisis protocols.
 - Direct links to local support services (respite care, financial aid, legal advice).

B. Mandate Carer Inclusion in Care Planning

- Legally require healthcare providers to involve carers in care plan discussions, unless explicitly declined by the patient.
- Provide carers with written summaries of diagnoses, treatment goals, and medication schedules.

C. Expand Free Training Programs

- Fund nationally accredited mental health training for carers, including:
 - Mental Health First Aid.
 - Cultural competency (for supporting diverse communities).
 - Self-care strategies to prevent burnout.

D. Create a Carer Advocacy Body

- Establish an independent organization to represent carers' interests in policy design and hold healthcare systems accountable for carer engagement.

E. Improve Outreach to Marginalized Carers

- Partner with community organizations to deliver multilingual resources and culturally sensitive support for CALD, First Nations, and rural/remote carers.

4. Alignment with the Agreement

These recommendations align with the Agreement's goals of **integrating lived experience** (Clause 20) and **improving service accessibility** (Clause 122). By empowering carers, the mental health system becomes more **person-centred** and **sustainable**, reducing long-term costs and improving outcomes.

5. Conclusion

Carers are critical yet undervalued stakeholders in mental health care. Addressing information gaps and systemic exclusion will strengthen the Agreement's impact, reduce carer burnout, and improve patient outcomes. I urge the Commission to prioritize these reforms.

6. Attachments

- [Personal testimonial on challenges faced as a carer (non-confidential)].
- [List of suggested resources for the National Carer Information Portal].