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Disclaimer of Liability

This Consumers Guide has been prepared in good faith. The information it contains is intended to assist consumers of mental health services and their families, to understand the operations of the Mental Health and Related Services Act (the Act) and their rights within its provisions.

The Act applies to everyone, regardless of age. Whenever possible and where appropriate, legal guardians should be involved in the decision-making process when a minor or a person under guardianship is referred under the Act.

While this Guide has been prepared with every care, neither the Northern Territory Government nor the authors accept any responsibility for the results of specific action taken on the basis of the information it contains, nor for any errors or omissions within it. The guide will be updated from time to time, and any perceived error or omission should be brought to the attention of the Director Mental Health, Department of Health and Families, (DHF).

Preamble

This Guide is a supplement to the Act. For clarification or further detail, refer directly to the Act. If there are questions, refer them to the manager of your local mental health service in the first instance. The Director or the Senior Policy Officer within the Mental Health Program may also be contacted.

For general inquiries and additional copies, contact:

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87 Mitchell Street, Darwin NT 0800
Telephone (08) 8999 2553
Facsimile (08) 8999 2530

Copies may also be downloaded from the DHF Mental Health internet site. All updates and revisions to this guide will be placed on the website: www.health.nt.gov.au/Mental_Health.

Published by the Mental Health Program
© NT Department of Health and Families 2009
1st Edition 2009

Acknowledgement

This guide is based on similar publications from Western Australian & Victoria and the content adapted to reflect the NT context.
The Mental Health and Related Services Act (the Act) commenced operation on 1 February 2000, following the repeal of the Mental Health Act 1980.

The Act was developed over a period of eight years in a process involving extensive consultations with NT stakeholders and informed by the United Nations Principles for the Protection of Persons with a Mental Illness and for the Improvement of Mental Health Care (1991) and the National Mental Health Statement of Rights and Responsibilities (1991).

A review of the Act and ensuing consultation process identified a number of issues for consideration and amendment. In October 2006 Cabinet released the draft Mental Health and Related Services Amendment Bill for public comment giving rise to further refinements before the Bill was passed in the Legislative Assembly on 19 April 2007.

I would like to take this opportunity to thank all of the individuals and organisations who participated in this process and who took the time to formally submit a response to the review or to participate in the consultations. Your input has been of immense value in refining the legislation.

The legislation facilitates enhanced partnerships between consumers of the services and their carers and those who provide services in both the Government and non-government sectors. It aims to protect human rights, provide access to treatment and promote recovery and ensure the safety of individuals and the community.

This first edition of the Consumers Guide is aimed at helping consumers of mental health services develop a better understanding of how the Act works and what they can expect as a client/patient of NT Mental Health Services.

Dr David Ashbridge
Chief Executive
Department of Health and Families
February 2009
Mental Health and Related Services Act

The Mental Health and Related Services Act (the Act) provides for the care, treatment and protection of people with mental illness whilst also protecting their rights and ensuring those important to them can be appropriately involved in their care.

The Objects of the Act are outlined in s3. A range of other provisions are included regarding the rights of consumers of mental health services. These provisions collectively ensure that:

- Your rights are protected and external monitoring bodies including the Mental Health Review Tribunal (the Tribunal) and the Community Visitor Program are established to ensure these rights are observed;
- You are provided the best care and treatment with the least restriction of your freedom and the least interference with your rights and dignity;
- Treatment is geared to ensure that clients receiving treatment in the community are protected;
- The contribution of families, friends and other non-professional caregivers to the lives of those with mental illness are recognised.

Northern Territory Mental Health Services (NTMHS)

NTMHS is a specialist service providing a range of assessment and treatment services for people with mental illness or other mental health related problems. Mental health professionals are employed by the service and work in multidisciplinary teams, working with you to achieve the best possible outcome for you.

Inpatient units are located in Darwin and Alice Springs and community mental health teams are based in Darwin, Alice Springs, Katherine, Tennant Creek and Nhulunbuy. Teams from these centres regularly visit remote communities across the Territory. Contact details for each of the teams are on page 43.

The majority of people using mental health services do so voluntarily and are treated in their own community.

This guide explains your rights and responsibilities as a consumer of NTMHS, the services available to you, and what to expect when you are receiving treatment under the Act.
Rights and Responsibilities

What are my rights when I am receiving treatment from NTMHS?
You have the right to:

■ Be given information about your legal status, both verbally and in writing;
■ See a doctor and to get a second opinion from another doctor;
■ Ask questions and be fully informed about any treatment that is provided to you and why;
■ Refuse medical treatment (with some exceptions) and seek health advice and/or medical attention for general health issues;
■ Contact and be contacted by letter and phone and have people visit you in hospital (subject to hospital rules) and see them in reasonable privacy;
■ Have your personal possessions (with some exceptions);
■ Apply to inspect and receive accurate copies of any documents about you;
■ Expect that your personal information will be kept confidential (with some exceptions);
■ Seek legal advice on any matter;
■ Contact the Community Visitor;
■ Apply to the Tribunal for a review of any decision made about you that you disagree with;
■ Make a complaint;
■ Have your culture and gender considered in your treatment.

You can also expect to be able to share your thoughts and wishes about your treatment, care and rehabilitation with the treating team.

Some further information about your rights:
Right to information about your legal status
You have the right to be told, both by having someone explain them to you and in writing, what your legal status is, both when entering the service and on an ongoing basis if anything changes. You must be able to understand this information and if needed an interpreter should be used to make sure you understand.

You can also ask to have this information given to another person.
If you do not understand what you are being told, you can ask someone on your treating team to answer your questions. You can also ask to have someone with you when your treatment is being discussed e.g. a friend, family member, Community Visitor and/or you legal representative to help you to ask questions to better understand the information being provided to you.

Right to see a doctor and to get a second opinion from another doctor
As an involuntary patient, a second opinion from another doctor employed by NTMHS will be given automatically within 24 hours of your admission. If this does not happen you have the right to ask to see another doctor.

You may also seek an assessment and opinion from someone outside NTMHS. This assessment and opinion may, for example, be presented by your legal representative at a Tribunal hearing and may be provided in person or in a written report. Where this occurs you will need to pay this person’s fees yourself.

Right to refuse medical treatment (with some exceptions) and seek health advice and/or medical attention for general health issues
If you are receiving treatment involuntarily, you can be given psychiatric treatment against your will. However, you may not be given non-psychiatric (medical) treatment if you are able to give consent to the treatment but decide not to consent. If you are unable or unwilling to provide consent to the treatment, it may be given to you where:

■ The Tribunal approves the treatment;
■ The Tribunal says that the treatment needed can be approved by your doctor; or
■ An Adult Guardian (if you have one), consents to the treatment;

Right to contact and be contacted by letter and phone and have people visit you in hospital (subject to hospital rules) and see them in reasonable privacy
You have the right to have visitors, write and receive letters or make telephone calls in reasonable privacy. Your mail should be provided to you unopened.

If your doctor decides that visits, phone calls or letters are not in your best interests, these rights can be restricted or denied. When this happens the doctor must review this decision daily.

Your doctor must also tell the Tribunal that your rights have been denied and why this has been done. You can ask the Tribunal to review the doctor’s decision.
Rights and Responsibilities

Right to have your personal possessions (with some exceptions)
In most cases, you will be able to have and use your own clothes and other personal possessions. You are not able to bring hazardous or very large objects, or anything that might be a nuisance to other people or things that may invade their privacy.

Right to apply to inspect and receive accurate copies of any documents about you
When you enter NTMHS, you will be given information about your rights and entitlements, why you were admitted and you will generally also be given information about your medication and treatment. You can also ask for access to your records (see ‘Application to Access documents’ sample letter on page 40). However, an application may be denied in circumstances where:

- Your doctor thinks that the documents content could be harmful to you, or put others at risk;
- The documents include personal information about someone else;
- The documents have information that has been given in confidence and can’t be given to you unless that person providing the information agrees that it can be given to you.

If you are unable to see your documents for one of these reasons, then you can apply to the Tribunal for a review of this decision and/or ask someone else to view them on your behalf.

Right to expect that your personal information will be kept confidential (with some exceptions)
NTMHS staff will generally not disclose information that indicates you have received treatment from mental health services or provide details relating to your admission, treatment or management. Access to this information is limited to those staff working with you directly to help your recovery. All staff are required to keep your information confidential.

Information about your mental health will generally only be given to other people when you agree that it can be given, however there are some exceptions. Information can be given without your consent where:

- Legislation requires the information to be provided;
- Your Adult Guardian has given permission for the information to be given;
■ You have passed away and your next of kin, or the executor or administrator of your estate gives permission for the information to be given;
■ It is ordered by the courts or required in the course of a police investigation;
■ It is required in relation to your Adult Guardianship;
■ It is being given to those providing your care, who need the information because it is relevant to your ongoing care and it is therefore considered to be in your best interests to give them the information;
■ It is being given to a police officer who needs to know because your doctor believes you are likely to cause serious harm to yourself or to someone else or may become a danger to the community and the information is needed to help protect you or others;
■ You go missing from the hospital and NTMHS are concerned about you and the information needs to be given to police so they can try to find you;
■ Medical or social research is approved and the information will help researchers and you are not identified and the information is not against your interests;
■ The information is being provided to another health provider as part of your further treatment; and
■ The Minister or the CEO of the Department of Health and Families believe that providing information is in the public interest and needed to ensure the safety of others.

**Right to seek legal advice on any matter**
When you are admitted as an involuntary patient, a lawyer will be told about your admission so you can be represented at the Tribunal and advised on any other legal matters. This lawyer may either be a private practitioner of your own choosing or one appointed through the NT Legal Aid Service, NAAJA or CAALAS.

If you choose not to have lawyer when the Tribunal is reviewing your admission, the Tribunal may appoint a lawyer anyway if they believe you should be represented.

**Right to contact the Community Visitor**
You have the right to access the Community Visitor Program (CVP). When you enter NTMHS you will be given a copy of the CVP information brochure and assisted to contact them if you need to. Your family and friends may also contact a Community Visitor on your behalf.
If you tell staff that you would like to see a Community Visitor, staff must tell the CVP as soon as possible, and not later than 24 hours after you have made your request. A Community Visitor will then contact you within 48 hours (usually sooner however they are not available over weekends) to discuss your concerns and make a time to come and see you if required.

**Right to apply to the Tribunal for a review of any decision made about you that you disagree with**

As an involuntary patient/client, if a decision is made that you disagree with in relation to anything to do with your admission, treatment or care, you have the right to apply to the Tribunal for a review of this decision.

If you are admitted to hospital involuntarily, a doctor will see you at least once every 72 hours to make sure that you still need to be admitted involuntarily. Additionally, the Tribunal must review your situation within 14 days of your admission and decide whether you should continue to be an involuntary patient. You can also ask for this first review to happen earlier.

**Right to make a complaint**

You, your carer or representative have the right to make a complaint about the services and treatment you receive. NTMHS will try to respond to your complaints quickly and fairly and you will not be disadvantaged in any way because you have made a complaint.

You can make a complaint or provide feedback in person, by phone, letter or e-mail about your treatment and services you have received. You can ask a staff member to help you with how to make a complaint.

If you complain that a crime may have been committed you have the right to, and should, report the matter to the police.

In most cases, a senior member of staff (e.g. team manager) will investigate your complaint and keep you up to date with progress. When the investigation is complete, you will receive a letter telling you what the investigation found and what steps (if any are required) are being taken in response to your complaint. If you are unhappy with the response, you can contact a Community Visitor to help you take the matter further.

**What if my rights are denied?**

If you have been denied any of your rights you can make a complaint. You can contact the CVP or your lawyer to help you with this. If your doctor has refused
you any of your rights they must tell the Tribunal and this will be discussed at your next Tribunal review.

What if I am receiving treatment voluntarily?
In most cases the rights of voluntary patients and involuntary patients are similar. The main differences are that as a voluntary patient:

- You have the right to accept or decline any treatment offered to you; and
- Your informed consent must be obtained for treatment to be provided to you (for more about informed consent see page 15).

What are my responsibilities?
As a patient receiving treatment at a mental health inpatient unit you have a responsibility to:

- Treat other people with respect;
- Take part in your treatment; and
- Take part in unit activities that will help you to recover.

Other rights responsibilities and general information for in patients
When you are admitted to an inpatient unit, you will also be provided with local information about the unit and what you can expect during your admission. This information will include details of ward programmes, visiting hours, mealtimes and other useful information such as how to access your money. There is also information about other parts of the service and what to expect when you are discharged from hospital. The information provided will also explain your rights and responsibilities.
Voluntary Treatment

What is voluntary treatment?
Voluntary treatment is treatment provided by NTMHS with your consent or the consent of your parent/guardian or Adult Guardian. This treatment may happen in the community or in hospital where a doctor employed by the NTMHS authorises your admission to hospital for treatment.

Who can ask for a voluntary admission to hospital?
- A person who is over the age of 14;
- A parent or guardian of a person who is under the age of 18; or
- A person’s Adult Guardian.

What if I am refused a voluntary admission to hospital?
If a doctor assesses you and decides not to admit you to hospital, the doctor will tell you and/or your parent/guardian or Adult Guardian they have made that decision.

The doctor may suggest that you would benefit from voluntary treatment in the community and/or they may give you information about where to go to seek further support and help, which may include a referral to another organisation.

They will also tell you that you have the right to the Tribunal for a review of this decision and you should be given contact information for the Tribunal and the paperwork you need to submit an application.

Who will provide my treatment?
A number of people (your ‘treating team’), will assist in your treatment. Who this will include will depend on what your needs are and NTMHS has a range of people who provide treatment and care, including psychiatrists, nurses, psychologists, social workers, Aboriginal Health Workers, Aboriginal Mental Health Workers and Occupational Therapists.

What if I am under the age of 18?
NTMHS prefers to provide treatment for young people under the age of 18 in the community wherever possible. Sometimes young people do require admission to hospital and in these cases you will be cared for in a general ward wherever possible. If you are admitted to a mental health inpatient unit you will be accommodated separately from adults or, if this is not possible, you will have one to one nursing care.
What can I expect as a voluntary patient in hospital?

When you first come into the hospital, a doctor will examine you and decide whether you need treatment and if so, whether this should happen in hospital or in the community. If the doctor thinks you would benefit from treatment from NTMHS, they will also make sure that you agree to admission and that you know what that means for you. You will be given a consent form to sign, which you should only complete if you understand and agree to the admission and the treatment offered.

Within 72 hours another doctor will examine you again to ensure you need to remain in hospital and that you still agree to the admission.

What is informed consent?

Informed consent is required for a voluntary admission to proceed. Giving informed consent it means that you:

■ Agree to admission or treatment without any pressure from anyone else;
■ Understand the effects of giving consent;
■ Sign a form consenting to admission to hospital;
■ Have been given a clear explanation of the assessment and possible diagnosis;
■ Have been given information about the planned treatment, its purpose and the length of time it will be needed;
■ Have been given full and open information without, exaggeration or distortion of the benefits, discomforts and associated risks of the treatment;
■ Have been given information about other possible treatments;
■ Have been provided with clear answers to all questions and understand the answers given;
■ Have been advised that you can withdraw consent at any time;
■ Have been advised that independent medical or legal advice is available.

Information must be provided in a form you can understand and an interpreter should be used wherever available and necessary.

If you do not or cannot give informed consent for whatever reason, you must be admitted and treated as an involuntary patient. However, if the APP is unsure of whether you are capable of giving informed consent, they can admit you as a voluntary patient and ask the Tribunal to make this decision.
Voluntary Treatment

What if I want to stop my treatment?
As a voluntary patient you have the right to stop treatment whenever you wish. This includes leaving the hospital or deciding to stop attending community mental health services and you have the right to refuse any treatment offered to you. However, if you do decide you would like to leave the hospital or stop attending appointments at a community mental health service you should talk to someone from your treating team to discuss your plans.

Can I be made an involuntary patient?
Yes. If you are a voluntary patient in hospital, this might happen if you decide you want to leave the hospital and the staff are concerned that you are becoming more unwell and that leaving the hospital would not be a good idea for you as there is a risk to your health or safety, or the safety of someone else if you do leave.

If this happens you can be kept at the hospital for up to 6 hours, during which time a doctor will examine you. If the doctor agrees that you need to stay in hospital, then you may be made an involuntary patient (see the Involuntary Patients on page 17). If you are kept at the hospital for longer than 6 hours without seeing a doctor you should ask to contact the Community Visitor and/or your lawyer.

If you are receiving treatment voluntarily in the community and decide to stop participating in your treatment plan but your treating team believe that there is a risk to your health or safety or the safety of someone else, they may either make an Interim Community Management Order (see Community Management Orders on page 28) for you or make a Recommendation for Psychiatric Examination. This means you must be taken to a hospital and examined by a doctor, who may decide to admit you as an Involuntary Patient.

Other rights responsibilities and general information for all inpatients
When you are admitted to the inpatient unit in Darwin or Alice Springs you will be given specific information about those units. This will include details of ward programmes, visiting hours, meal times and other local useful information such as how to access your money. There is also information about other parts of the service and what you can expect when you are discharged from hospital.
**Being made an involuntary patient**

Any doctor or mental health worker can recommend that you be taken for psychiatric examination under the Act. This means that you must be taken to a hospital for further assessment. At the hospital you will be seen by a doctor employed by the NTMHS, who will decide if you require treatment under the Act and if so, whether this needs to happen in hospital or not.

**Who is an involuntary patient?**

An involuntary patient is someone who is admitted to hospital because they have a mental illness or mental disturbance and they are unwilling or unable to consent to the admission and treatment.

**Involuntary admission**

An involuntary admission occurs when a doctor decides to admit you to hospital without your consent because of mental illness or mental disturbance.

Involuntary admission may also happen where you have indicated that you agree to a voluntary admission but your doctor decides that you are not well enough to give informed consent to admission and are unlikely to comply with a voluntary arrangement.

The Act has conditions that must be met before you can be made an involuntary patient.

Even though you receive treatment without your consent, as an involuntary patient you still have a number of rights. See Rights and Responsibilities on page 8.

**Criteria for Involuntary Admission**

There are two different grounds for involuntary admission to hospital – mental illness and mental disturbance. In addition to the criteria that you have either refused or are unable to consent to admission and treatment, the following criteria must be met:

**Conditions for an involuntary patient – mental Illness**

1. A doctor employed by the NTMHS must believe that you have a mental illness or disturbance and that because of this illness or disturbance you need treatment in hospital.

2. If you don’t have treatment you may cause serious harm to yourself or someone else, or your mental or physical health will deteriorate.
3. The doctor determines that you have unreasonably refused treatment or, because you are unwell, you cannot give informed consent to treatment.

4. There is no better way of making sure you receive treatment.

5. The treatment you need cannot be given to you as a voluntary patient or as an involuntary patient on a CMO.

Conditions for an involuntary patient – mental disturbance
You may be admitted for mental disturbance if you do not meet the above criteria for admission for mental illness but your behaviour is so concerning to the doctor that they believe you need to be admitted to hospital.

What happens when I am made an involuntary patient?
When you first come into the hospital for admission, a doctor will examine you to determine whether you need to stay in the inpatient unit.

Within 24 hours (mental illness) or 72 hours (mental disturbance), another doctor will examine you to confirm whether or not you still require involuntary admission. If the second doctor agrees with the first doctor, you may be detained for up to 14 days (mental illness) or a further 7 days (mental disturbance). During this time your case will be reviewed by the Tribunal. You can also apply to have this review happen earlier.

If either the first or second doctor decides that you don’t need to be admitted as an involuntary patient, they may consider admitting you as a voluntary patient (see Voluntary Treatment on page 14) or consider involuntary treatment in the community (see Community Management Orders on page 28) or voluntary treatment in the community (see Voluntary Treatment on page 14).

Within one day of your admission, the Tribunal, your lawyer, a Community Visitor and with your consent, your primary carer or next of kin must be informed of your admission as an involuntary patient. If you have an Adult Guardian they must also be informed.

Review of admission and continued detention
The Tribunal will review the order making you an involuntary patient within 14 days (mental illness) or 10 days (mental disturbance). When they review your admission, the Tribunal may decide that you must remain in hospital or order that you be released (see Mental Health Review Tribunal on page 24).
A doctor will also examine you at least once every 72 hours to make sure that you still need admission. If at any time your doctor decides you no longer need involuntary admission, they must cancel the order.

**What is a Financial Protection Order?**
If you are an involuntary patient and you are having trouble managing your financial affairs or putting your financial situation at risk, your doctor and case manager may apply for a Financial Protection Order (FPO). This will be done to protect you from any neglect, abuse or exploitation of your finances while you are unwell.

Within 24 hours of making an FPO, NTMHS staff must:

- Tell you the order has been made (in most cases if a FPO is made on your behalf you will be told before it is made and will be given the reasons why);
- Inform the Tribunal;
- Notify your lawyer and your carer, with your permission (or without it if it is in your best interest); and
- Notify the Principal Community Visitor.

A FPO will remain in force for 14 days and can be extended another 14 days if necessary. If your doctor and case manager feel that financial protection will be required beyond the maximum 28-day period, an Adult Guardianship application must be made.

If at any time your doctor and case manager feel you no longer require help to manage your finances, the order will be cancelled.

While the order is in force, NTMHS will keep records of all actions taken on your behalf under the order and make these records available for inspection if requested to do so by the Tribunal or a Community Visitor.

**What if I was on an order in another State or Territory before coming to the NT?**
If you have been an involuntary patient in hospital or in the community in another State or Territory, then the Tribunal can be asked to transfer the order to the Northern Territory. The Tribunal needs to be sure that the order was in force in the State or Territory where you came from, and that the mental health service interstate and NTMHS agree to transfer the order.
Can I leave the hospital?
While you are being detained as an involuntary patient you cannot leave the inpatient unit unless your doctor says you can. If you are given leave it will be for a specific purpose and you must comply with the conditions of your leave.

If you do leave the hospital without permission, a police officer or someone else authorised by your doctor may pick you up and take you back.

If you want to leave the hospital to see someone, or attend an appointment, you can ask your doctor for permission. If they think that the leave is for a good reason and will be good for you then you may be given permission.

Your doctor may cancel your leave if they believe that you are likely to come to harm, harm someone else or become more unwell, or if you have not done what you agreed to while on leave.

If your leave is cancelled, the doctor who cancels it must try to tell you or your representative of this.

Being discharged from the hospital/clinic
Your discharge planning will start from the moment you start receiving treatment from NTMHS. Your treating team will discuss your options with you and your family. You will be asked for your opinion about where you will live, your medication, and what help you will need to live in the community. Your carer and/or family will also be involved in these discussions wherever possible and appropriate.

If at any time your doctor believes you are well enough, they may allow you to leave the hospital. Before you leave your doctor will also make sure you are given information about any ongoing help available or arranged for you once you are out of hospital.

When you leave the hospital you will have a discharge plan that contains arrangements for your accommodation, ongoing treatment and any other necessary supports. Anyone involved in helping to carry out the plan will also need to be aware of it.

Your rights regarding treatment depend on whether you are a voluntary or involuntary patient.
Treatment - Voluntary Patients
As a voluntary patient, treatment may only be given with your consent or the consent of your Adult Guardian.

In order to give consent you must be given all the information you need to make a good decision about whether you want to have the treatment proposed.

If the doctor thinks you are unable to give informed consent and wants to make you an involuntary patient, he/she can give you treatment immediately while waiting for the Tribunal to review your admission if the treatment is necessary to:

■ Prevent you hurting yourself or someone else;
■ Prevent you doing something that is likely to hurt you or someone else;
■ Prevent you from becoming more unwell; and
■ To relieve acute symptoms of your mental illness.

Treatment - Involuntary Patients
Your doctor will develop a treatment plan specific to your needs and wishes but if they think certain treatments are necessary for your wellbeing, they can include them in your treatment plan even if you don’t agree to them.

The doctor will ask the Tribunal to approve your treatment plan. While waiting for this to happen, treatment can still be given to you where your doctor believes it is necessary to:

■ Stop you hurting yourself or someone else;
■ Stop you doing something that is likely to hurt you or someone else;
■ Stop you from becoming more unwell; or
■ To relieve acute symptoms of your mental illness.

Your treatment plan will be reviewed often and changed where necessary.

Electro Convulsive Therapy (ECT)
ECT is used to treat a number of mental illnesses, but is mainly used to treat severe depression. When having ECT a person is given a general anaesthetic and a muscle relaxant, and then a small electric current is passed through the brain causing a small seizure.
ECT must not be given under the Act unless:

- You have given informed consent to the treatment;
- Your Adult Guardian has consented to the treatment;
- The treatment is authorised by the Tribunal after two doctors have recommended the treatment;
- It is immediately necessary to save your life, to prevent you suffering serious mental or physical deterioration, or to relieve severe distress.

**Medical Treatment**

Medical treatment under the Act includes non-psychiatric treatment (e.g. surgery) and other major medical procedures.

A major medical procedure can only be done if the Tribunal gives its approval, or your Adult Guardian agrees to the treatment and has the consent of the Local Court under the *Adult Guardianship Act*.

A major medical procedure may be authorised by your doctor as a life saving measure or to prevent serious harm to you.

**Seclusion**

Seclusion means being kept in a room by yourself and not being able to leave freely.

You can only be secluded if:

- You are a patient in a mental health inpatient unit; and
- A doctor, or in an emergency, the Senior Registered Nurse on Duty (Senior RNOD) gives permission.

Permission can only be given for you to be secluded if it is necessary for:

- Your protection;
- The protection of someone else;
- The protection of property; or
- To prevent you from leaving the ward without permission.

If a Senior RNOD arranges your Seclusion they must tell a doctor they have done so as soon as possible. The doctor may or may not agree to the Seclusion and will consider if it should continue.
If secluded you must be:

- Visited by a nurse at least every 15 minutes;
- Reviewed by a doctor within 3 hours;
- Examined by a doctor at least once every 3 hours while in Seclusion;
- Given whatever bedding and clothing you need;
- Given food and drink;
- Have access to the bathroom; and
- Given any other psychological and physical care that you need.

**Disagreeing with treatment**

If you are an involuntary patient and you disagree with treatment you are given, you have the right to ask for another doctor to see whether you need that particular treatment (see ‘Complaint about Treatment’ sample letter on page 42).

You also have the right to apply to the Tribunal for a review of your admission and treatment.
The Mental Health Review Tribunal (Tribunal) is an independent panel established to review and make decisions about the care and treatment of patients/clients of NTMHS.

Who are the members of the Tribunal?
The Tribunal has a range of members who are rostered to sit at hearings. Three members will sit at each hearing:

- A qualified lawyer;
- A qualified doctor (not employed by NTMHS); and
- A community member who has experience and/or interest in mental health.

What does the Tribunal do?
The Tribunal will review all of the information submitted about your circumstances and will make decisions about whether you should:

- Remain an involuntary patient;
- Continue to be treated as an involuntary patient but in the community rather than in the hospital;
- Remain a voluntary patient in the hospital;
- Be given non-standard treatment (e.g. ECT).

The Tribunal will also:

- Review any other decisions about your admission or treatment; and
- Hear your applications for review about any decisions relating to your admission or treatment.

How can I apply for a Tribunal review?
Within 24 hours of making an Interim Community Management Order or an involuntary treatment order for you, your doctor will inform you of your right to apply for an early review of the order. This means that that instead of waiting up to 14 days for a review, you can ask the Tribunal to consider your circumstances earlier.

You can let your doctor or another staff member know that you want the Tribunal to review your circumstances early, or you can ask your lawyer to help you (who will have been told you have been admitted to hospital at the same time as the Tribunal).
The doctor will also check with you again in another 1 to 3 days to make sure that you have not changed your mind about an early review. The doctor or another staff member will also talk to you about your illness and the advantages and disadvantages of early review.

**Representation before the Tribunal**

You, your carer or someone else can be your representative at a review before the Tribunal if the Tribunal agrees. A lawyer can also represent you. A lawyer will have been told when you were admitted as an involuntary patient. This lawyer may be a lawyer in practice private arranged by you or your carer or it may be a lawyer from a legal aid service such as NT Legal Aid Service or the Northern Australia Aboriginal Justice Agency (NAAJA).

**Interpreters**

If you have problems speaking and understanding English, an interpreter can be present at the hearing to help you understand the proceedings and to communicate your views or to ask questions.

If you are an Indigenous person, NTMHS will arrange for an Aboriginal Health Worker or Aboriginal Liaison Officer to attend the hearing wherever possible.

**Access to your records**

Your doctor must make sure that before the hearing you and your lawyer or representative can read the forms and reports submitted to the Tribunal. Your doctor should explain the forms and documents and the purpose and nature of the hearing to you and your lawyer and will encourage you to attend the hearing.

**What happens on the day of the review?**

Tribunal hearings are informal and are usually held at the inpatient unit.

At the beginning of the hearing, everyone present will introduce themselves, including the Tribunal. You can expect that at least one of the Tribunal members will be linking into the hearing through videoconferencing (TV) because the Tribunal doctors are from outside of the NT.

During a hearing, the members of the Tribunal will ask questions, so they have the information they need before they make an order.

Most Tribunal hearings are completed in about 30 minutes, but may take longer to make sure you receive a full and fair hearing.
**Who is present apart from the three Tribunal members?**
Your doctor and/or other members of your treating team will attend the review as well as you and your lawyer. The Tribunal may also allow other people such as your relatives or friends to be present.

**Submissions from you or your representative**
The Tribunal will provide you and your lawyer with an opportunity to:

- Give evidence;
- Have other people give evidence on your behalf;
- Ask questions of your doctor or any member of your treating team present and provide your opinions about your circumstances.

**Preparing yourself for Tribunal review**
Before the review you will have an opportunity to read documents about the review and discuss any issues you want to raise at the hearing with your lawyer.

You might also want to ask your treating team if you are receiving any strong medication that might make it difficult for you to concentrate during the hearing.

It is important for the Tribunal to know what support is available to you in the community. If your family or friends can’t attend the review, they could write a letter telling the Tribunal about the help they can provide or tell your lawyer what they can offer. If your family or friends agree, you could ask the Tribunal to telephone them during the hearing so that they can be involved in the discussions.

If you would like to suggest treatment other than that provided by NTMHS, it would be useful for you or your lawyer to present your views to the Tribunal so it can look at the treatment arrangements suggested e.g. a report from another doctor might be something you could submit for consideration if you have one.

**The possible outcomes of a review**
The Tribunal can make a range of decisions about your circumstances. It may decide:

- To issue a Community Management Order for you or to continue your existing Community Management Order if you have one;
That you need to remain an involuntary patient in a hospital for up to 3 months under mental illness or 14 days for mental disturbance; or

To order a Community Management Order if you had been an involuntary patient; or

To change your legal status to that of a voluntary patient; or

To order that you be discharged.

As a voluntary patient, you can decide to stay in hospital and continue the treatment plan that has been developed for you or you may choose to leave. If you were on a Community Management Order before the review, you have a choice about whether to continue treatment voluntarily.

What happens after the review?
If you are unhappy with the Tribunals decision or order, you can appeal to the Supreme Court. Appeal documents must be filed within one month of the Tribunals decision. You are required to be represented by a lawyer in any appeal to the Supreme Court.

Legal Aid may help decide whether you have any grounds for appeal, or refer you to another legal service.
**Community Management** allows you to live in the community while being treated involuntarily.

NTMHS prefer to treat people in the least restrictive environment possible. The ideal form of treatment is voluntary and community based, and this is the type of treatment received by most people treated by NTMHS.

However, it is not always possible to treat a person on a voluntary basis. Sometimes a person will need involuntary treatment and the least restrictive approach for this is to place a person on a Community Management Order.

**What is a Community Management Order?**
Community Management Orders are made where a person is unwilling or unable to follow a treatment plan on a voluntary basis but can be treated involuntarily in the community rather than admitted to a hospital. If you are on a Community Management Order, you can live in a hostel or at home but you have to follow a treatment plan that is developed for you.

**When is a Community Management Order made?**
Your doctor can put you on a Community Management Order if you:

- Have a mental illness; and
- Need treatment or care, or you are likely to cause serious harm to yourself or someone else or suffer serious mental or physical deterioration; and
- Are not able to give informed consent; and
- A treatment plan has been prepared for you that can be carried out in the community in which you live.

When the order is first made by your doctor, it is called an Interim Community Management Order. This order lasts for 14 days and must be reviewed by the Tribunal who will also consider the treatment plan suggested by your doctor and case manager. If the Tribunal agrees with the treatment plan, this will form the basis of your Community Management Order.

Your treatment plan will include things like:

- Who is responsible for your treatment;
- Where the treatment or care is to take place e.g. your home;
- How often the person treating or caring for you must visit you or you must visit them; and
- Medication and/or other treatments you will need to receive under the order.
While your doctor is waiting for the Tribunal to approve your treatment plan, treatment may be given to you where he/she believes it is necessary to:

- Prevent you hurting yourself or someone else;
- Prevent you doing something that is likely to hurt you or someone else;
- Prevent you from getting more unwell; or
- Relieve the acute symptoms of your illness.

A Psychiatric Case Manager will be appointed by your doctor to oversee your treatment under the Order.

**Interstate Orders**

If you have been receiving treatment involuntarily in the community in another state, an application can be made to the Tribunal for your order to be transferred to the NT. The Tribunal needs to be sure that the order was in force in the State or Territory you have come from, and that the both the interstate mental health service and NTMHS agree to the order being transferred.

**How long do I have to be on a Community Management Order?**

An Interim Community Management Order can be made for 14 days. A Community Management Order may be made for up to 6 months.

The Tribunal will review your order within 6 months and make a decision as to whether it needs to be extended and/or changed in any way. However, if your Psychiatric Case Manager or doctor thinks that you no longer need a Community Management Order, they may cancel the order.

**What happens if I don’t do what the order says?**

If your doctor and Psychiatric Case Manager believe that you are not following the conditions of your Community Management Order, they will remind you what the order says and try to help you get back on track. If this is not possible, they have the power to suspend your order and try to persuade you to do what the order says.

When an order is suspended, your doctor will try to inform you, your Adult Guardian or representative that the order is suspended. Suspending your Community Management Order might mean that you will need to be admitted to the hospital and given your treatment (if you don’t agree to take the treatment in the community) and/or remain in hospital for a longer period until you are well enough to be treated in the community again.
**Change of supervising doctor/variation of order**
If your doctor transfers your care to another person you will receive a letter telling you this will be happening. The letter will tell you who your new doctor is, where they are and how often you will need to see them.

If a change is made to your Order and you are confused about what to do you should ask your Psychiatric Case Manager to explain the changes to you to help you understand.

**Expire of a Community Management Order**
Your treatment plan will always include a review date, but you can request a review at any time. Your Psychiatric Case Manager must regularly monitor your progress and report back to your doctor, who also must examine you as often as the Community Management Order says.

If it the Tribunal, your doctor and Psychiatric Case Manager decide that you no longer need involuntary community treatment, they will cancel the order.

Unless it is cancelled earlier, renewed or extended, a Community Management Order will finish on the date written on your order.

**Discharge**
On discharge from community treatment with NTMHS, you will also have a discharge plan that addresses your ongoing needs and includes advice on how to get back in contact with NTMHS if you need to. A letter will be written to your local doctor telling them about treatment you have received from NTMHS and setting out what you will need from that doctor in the future.
When can Police detain me?
A police officer may detain you if the officer thinks that you:

■ Might require treatment under the Act; and
■ Are likely to cause serious harm to yourself or to someone else unless apprehended immediately;

If you are apprehended by police you will be taken to a doctor or another mental health professional for assessment to see if you need to be admitted to hospital.

Police have a number of powers under the Act that give them the authority to:

■ Use any reasonable force and assistance; and
■ Enter private property where they believe you might be.

Once you have been apprehended the police officer must bring you to a mental health practitioner for assessment as soon as possible and must tell you that you have been detained for assessment under the Act.

Police apprehension after suspension of a Community Management Order
When suspending a Community Management Order, your doctor may ask a police officer to help transport you to the hospital. Police will usually only be involved if you are refusing to come to hospital and your behaviour is posing a risk to others. Asking the police to assist in these circumstances is often the safest way to get you to hospital.

Assessment Warrant
NTMHS staff or NT Police can ask the Tribunal for an Assessment Warrant to apprehend you and take you to be assessed by a doctor or another mental health professional.

An Assessment Warrant might be necessary when NTMHS have not been able to assess you either because they cannot find you or you have refused to agree to be assessed and your behaviour indicates that Police need to be involved because there is a risk to other people.

Even if you have not been seen directly by anyone from NTMHS, other people may have been worried about your behaviour and have provided information to NTMHS indicating that you may be unable to look after yourself and may need involuntary treatment.
Where the Tribunal issues an Assessment Warrant for you, you can be assessed anywhere and by NTMHS staff. If you are not assessed within 14 days the warrant will expire.

Under the Assessment Warrant a police officer has authority to:

■ Use any reasonable force and assistance; and
■ Enter private property where he/she believes you might be.

Once you have been apprehended, the police officer will bring you to a mental health practitioner for assessment as soon as possible and will tell you that you have been detained for assessment under the Act.
If you are before a Court or serving a prison sentence and require treatment for mental illness or mental disturbance, you may be admitted to hospital. These admissions happen under Part 10 (Powers of the Court) and Part 11 (Admission of Prisoners). Almost all hospital admissions, including voluntary ones under these provisions will be to the secure Joan Ridley Unit in Darwin.

If you are in prison you can also be placed on a Community Management Order. Whilst in the prison you will be seen by the NTMHS ‘forensic’ teams based in Darwin or Alice Springs.

If you are receiving treatment under Parts 10 or 11 you will still have the same rights and responsibilities as any other patient admitted to hospital except that you are not free to leave and may have additional security arrangements which have been agreed to by Mental Health and Correctional Services.
If you are unable to make decisions about your own welfare, you may need someone appointed as an Adult Guardian to make decisions for you. This gives a person the legal authority to make decisions for someone else, over the age of 18, who cannot make good decisions about their daily living.

These orders are made when a Court believes that the person requires a guardian appointed under the Adult Guardianship Act. There are three types of Adult Guardianship orders – full orders, conditional orders and temporary orders.

**Full order**
These orders grant an Adult Guardian all the powers and duties they would have if you were their child and under the age of 18. Decisions made by your Adult Guardian are generally treated the same as decisions made by the you.

**Conditional Order**
These orders grant an Adult Guardian one or more of the powers and duties on behalf of that person. Decisions made by your Adult Guardian are generally treated the same as decisions made by you.

**Temporary Order**
Any person may apply to the Court for a temporary order naming the Public Guardian as the Adult Guardian of a person. If the Court believes that your situation requires an urgent response then the Court will hold a hearing to decide whether a temporary order is needed. These orders are made for no longer than 90 days, during which time a Conditional or Full order may be made.

**Responsibilities of Adult Guardians**
A person appointed as an Adult Guardian must act in your best interests, and will act:

- As an advocate for you;
- So as to encourage you to lead a full life in the community;
- By encouraging and helping you to become able to care for yourself and make good decisions.
- To protect you from neglect, abuse or exploitation; and
- In a way that as far as possible, considers your wishes.

Further advice about Adult Guardianship can be obtained from the Executive Officer of Adult Guardianship and the Office of the Public Guardian (see Contact Details section on page 43).
Making a Complaint

Complaints about NTMHS or treatment
If you want to make a complaint about the service you are receiving or about your treatment (including medication, diagnosis, your doctor, or being denied your rights), the following people may be able to help you:

- Staff employed by NTMHS;
- A Community Visitor;
- The Health Complaints Commission; or
- The NT Ombudsman.

If you need someone to help you to make a complaint you can ask to see a Community Visitor, a consumer advocate group (see Contact Details section on page 43) or your lawyer.

Complaints about discrimination
If you want to complain about being discriminated against because of your mental illness, you can contact the Anti-Discrimination Commission (see Contact Details section on page 43).

Complaints about an assault
If you have been assaulted you should report it to NT Police and also contact the Sexual Assault Referral Centre or ask for help to do this if the assault is of a sexual nature.

Complaints about professional misconduct
If you have a complaint that a doctor, nurse or other treating team member has acted improperly you can complain to the relevant professional board (e.g. Medical Board or the Nurses Board).

Complaints about access to information
If you have been refused access to information kept by NTMHS or by the Tribunal about you or your treatment, you can ask your lawyer or a Community Visitor for advice about how you can make a complaint or make an application to access this information.

Freedom of Information
You can apply to see your mental health file and receive a copy of documents under the provisions of the Information Act. To do this, contact the Freedom of Information Officer at your hospital. There may be some restriction on the documents you are given, particularly where other people are mentioned in the file. If so, you may wish to seek advice from your lawyer to assist with your application.
Community Visitors

What is a Community Visitor and What Do They Do?
A Community Visitor is a person who looks into and tries to settle any complaints, worries, or problems that people may have with mental health treatment and care.

Community Visitors routinely visit Cowdy Ward and JRU in Darwin and the Mental Health Unit in Alice Springs and will also visit patients at their request, either in the ward or in the community at other times.

Who Can Talk To Them?
On admission to NTMHS, either in hospital or the community, you will be told of your right to access the Community Visitor Program and given a copy of the Program’s information brochure. You will also be told how to contact a Community Visitor and helped to do so if you need. Your carer is also able to talk to the Community Visitor.

How Do You Contact them?
If you are receiving treatment from NTMHS, tell a staff member that you want to talk to the Community Visitor. The staff member will tell the Community Visitors that you want to see them and they will then see you within 48 hours. You can also phone them, or write to them.

If you care for, represent or have an interest in someone who receives mental health treatment or care, you can phone or write to them directly (see Contact Details section on page 43).
It can be very frightening finding yourself in hospital. Although most people are not in hospital for very long, you may want to make sure that all the things you would have done if you were not in hospital are still getting done. Below is a checklist of things you might need to think about and you may need some help with when you are admitted to hospital:

**Checklist**
- Children - Who is looking after them? Who is picking them up from school?
- Pets – Who is looking after them? Who is feeding them?
- Does anyone need to know where you are?
- Rent/Mortgage payments - Is your rent/mortgage payment due?
- House/Income Protection Insurance - Is this covered if you are away from your home for more than a certain period of time?
- Bills - Do you have any outstanding bills that need paying?
- Centrelink forms/applications - Do you have forms needing to be sent?
- Court Appearances (Summons etc.)
- Applications for Legal Aid
- Work - Have you told your employer you won’t be at work?
- Clothes/Toiletries - Have you got the things that you need?

If you need some help with any of these things talk to the social worker in the inpatient unit to help you sort out these problems.
Complaint about the service (Client/Patient)

Jennifer Jones
14 Marly Street
DUNDEE DOWNS
NT 0873

The Team Manager
Tammy Morningside
Cowdy Ward
Royal Darwin Hospital
Rocklands Drive
TIWI NT 0810

14 January 2009

Dear Tammy,

I was an involuntary patient in Cowdy Ward from December 18th 2007 until January 5th 2008 and wish to complain about the restrictions placed upon my visitors during this time. My family and I had planned a Christmas gathering with family members coming from all over Australia to be together and because I was unwell I was not able to spend Christmas at home as planned. I am disappointed my family were not permitted to visit me all together so that I could also be a part of this special and rare family gathering. I would have been grateful if mental health services had made an effort to help me to achieve this and they did not.

Yours sincerely

Jennifer Jones
Complaint about the service (Carer)

Vince Jones
14 Marley Street
Dundee Downs
NT 0873

The Team Manager
Tammy Morningside
The Inpatient Unit
Cowdy Ward
Royal Darwin Hospital
Rocklands Drive
Tiwi NT 0810

14 January 2009

Dear Ms Morningside,

My daughter Jennifer Jones was an Involuntary patient in Cowdy Ward from December 18th 2007 until January 5th 2008. Our family had planned a Christmas gathering with members coming from all over Australia to be together and because. Jennifer was unwell and was not able to spend Christmas at home with the family. I know that there were a large number of us but I believe special provisions should have been made to help Jennifer to be part of this special and rare event that sadly may never be possible again. I would like to make a complaint about the inflexibility of your service and failure to accommodate our request.

Yours sincerely

Vince Jones
Application to Access documents

Graeme Edwards
27 Smith Crescent
Rabbit Flats
NT 0892

Dr Livingston,
Central Australian Community Mental Health Service
Alice Springs Hospital
Alice Springs
NT 0870

14 January 2009

Dear Doctor Livingston,

I have been told I have been given a Community Management Order by my Case Manager but have not been able to see the Order or the papers that were shown to the Tribunal. It is my right to see these papers and I ask that you arrange that I do see them as soon as possible.

Yours sincerely

Graeme Edwards
Complaint Regarding Conduct of staff

Graeme Edwards  
27 Smith Cresent  
Rabbit Flats  
NT 0892

The Team Manager  
Brian Beagle  
Community Mental Health Team  
Central Australian Mental Health Service

14 January 2009

Dear Mr Beagle,

I have been told I have been given a Community Management Order by my Case Manager. I have not been able to see the Order or the papers that were shown to the Tribunal. It is my right to see these papers and I would like to make a complaint about my Case Manager Kitty Katt who has refused to show them to me.

Yours sincerely

Graeme Edwards
Complaint about treatment.

Lucy Lanyard
15/77 Alice Drive
Darwin
NT 0800

The Consultant Psychiatrist
Dr Spock
Adult Team
TEMHS
Cowdy Ward
Rocklands Drive
Tiwi NT 0810

14 January 2009

Dear Dr Spock,

I am an involuntary patient in Cowdy Ward and am being compelled to take medicine that I find makes me very sleepy and unable to do the things I want to do. I would like you to review my medication and change me to another medication as soon as you can.

Yours sincerely

Lucy Lanyard.
**Useful Contacts & Services**

**MENTAL HEALTH PROGRAM**

**CAMHS**

Alice Springs Hospital  
PO Box 2234 Alice Springs NT 0871  
Tel 08 89517777 Fax 08 89517758

Barkly Mental Health Service  
CO Tennant Creek Hospital  
PO Box 346 Tennant Creek 0861  
Tel 08 89624300 Fax 08 89624304

Tennant Creek Hospital  
Schmidt St, Tennant Creek NT 0860  
Tel 08 89624203 Fax 08 89624205

CAMHS (Community)  
PO Box 2234 Alice Springs NT 0871  
Tel 08 89516931 Fax 08 89517836

CAMHS Mental Health Unit  
(Ward One)  
PO Box 2234 Alice Springs NT 0871  
Tel 08 89517610 Fax 08 89517618

**TEMHS**

Tamarind Centre  
12 Ross Smith Ave  
PO Box 140 Parap NT 0812  
Tel 08 89994988 Fax 08 89994999

Cowdy Ward, RDH  
Rocklands Drive Tiwi NT 0810  
Tel 08 89228850 Fax 08 89228878  
RDH Tel 08 89228888

**Emergency/On-call contact numbers**

Extended hours services are available in Darwin (Tel 08 89994988) and in Alice Springs (Tel 08 89517777). Ask for the on call worker for mental health.

**East Arnhem Mental Health Team**  
Community Health Building, Chesterfield Circuit  
Po Box 421 Nhulunbuy 0881  
Tel 08 89870414 Fax 08 89870443

**Gove Hospital (East Arnhem)**  
Matthew Flinders Way  
Nhulunbuy NT 0880  
Tel 08 89870352

**Katherine Mental Health Team**  
1st floor, Government Centre  
PMB 73 Katherine NT 0851  
Tel 08 89738724 Fax 08 89738561

**Katherine Hospital**  
Gorge Rd Katherine NT 0850  
Tel 08 89739211 Fax 08 89739000
***The following services are listed alphabetically by service type***

**ABORIGINAL HEALTH SERVICES**

**Alice Springs**

Central Australian Aboriginal Congress Inc.
25 Gap Rd Alice Springs NT 0870
PO Box 1604 Alice Springs NT 0871
Tel 08 89514444 Fax 08 89523397
Freecall 1800142900

Nganampa Health Council Inc.
3 Wilkinson St
PO Box 2232 Alice Springs NT 0871
Tel 89525300 Fax 08 89522299

**Darwin**

Danila Dilba Health Service
32-34 Knuckey St, Darwin
Tel 08 8942 5444 Fax 08 8941 3542

Danila Dilba
Emotional & Social Wellbeing
3/1 Malak Place, Malak NT 0820
Tel 08 89279335 Fax 08 89479002

**Katherine**

Katherine West Health Board Aboriginal Corporation
Unit 10, Riverbank Office Village
38 First Street, Katherine NT 0850
PO Box 147 Katherine NT 0851
Tel 08 8971 9300 Fax 08 8971 9340
E-mail: webqueries@kwhb.com.au
Website: www.kwhb.com.au

Sunrise Health Service Corporation
Pandanus Plaza
Level 1 25 First St Katherine NT 0850
Tel 08 89711120 Fax 08 89712511

Wurli Wurlinjang
Tel 08 89711156

**Nhulunbuy**

Miwatj Aboriginal Corporation
Arnhem Rd Nhulunbuy NT 0881
Tel 08 89873177 Fax 08 89873355

**Tennant Creek**

Anyinginyi Health Aboriginal Corporation
1 Irvine St Tennant Creek NT 0860
Tel 08 89622385 Fax 08 89622541

**ABORIGINAL INTERPRETER SERVICES**

**Alice Springs**

Aboriginal Interpreter Service
Leichhardt Building, 21 Gregory Tce
PO Box 1596 Alice Springs NT 0871
Tel 08 8951 5576 Fax 08 8951 5244
Office Hours: 8:00am - 4:30pm.
After hours Tel 08 8999 8353

Institute for Aboriginal Development (IAD)
3 South Terrace
PO Box 2531 Alice Springs NT 0871
Tel 08 89511311 Fax 08 89531884

**Darwin**

Aboriginal Interpreting Service
Ground Floor, RCG House,
83-85 Smith St,
PO Box 4450 Darwin NT 0801
Tel 08 8999 8353 Fax 08 8999 8855
Office Hours: 8:00am - 4:30pm.
After hours Tel 08 8999 8353
**ADULT GUARDIANSHIP (OFFICE OF)**

**Alice Springs**
Flynn Drive
Community Health Centre
Tel 08 89516744

**Darwin**
PO Box 40596 Casuarina NT 0811
Tel 08 8922 7343 Fax 08 8922 7304

**ADVOCACY SUPPORTS**

**Alice Springs**
NT Council of Social Service and NT Shelter
4 Elder Street
PO Box 1251 Alice Springs NT 0871
Tel 08 89514290 Fax 08 89528521
Mob 0438 552 584

Aged Care Advocacy Service
Centrecare NT
8 Hartley St
PO Box 832 Alice Springs 0871
Tel 1800354550 Fax 08 89533019

Disability Advocacy Service
63-65 Railway Tce
PO Box 8267 Alice Springs NT 0871
Tel 08 89531442 Fax 08 89530471

**Darwin**
Aged and Disability Rights Team
Darwin Community Legal Service
Cnr Manton and McMin Sts
GPO Box 3180 Darwin NT 0801
Tel 08 89821111 Fax 08 89821112
Free call 1800812953

**AGED CARE SERVICES**

**Alice Springs**

Aged Care Assessment Team (ACAT)
Flynn Drive Alice Springs NT 0870
Tel 08 89516744 Fax 08 89516789

ACAT Remote
Tel 08 89517842

Central Australian Supported Accommodation (CASA)
6/5 Hartley St
PO Box 9190 Alice Springs NT 0871
Tel 08 89534311

Aged and Disability Services
Eurilpa House
Todd Mall Alice Springs
Tel 08 89516744

Alzheimers Australia
Shp 5 Cinema Complex, Todd mall
PO Box 4648 Alice Springs NT 0871

Tangentyere Old persons Programme (TOPPS)
4 Elder St Alice Springs NT 0870
Tel 08 89514240

**Darwin**

Aged Care Assessment Team (ACAT)
Casuarina Plaza
Casuarina NT 0810
Tel 08 89227392 Fax 08 89227216

ACAT Remote
Tel 08 89228317

**Katherine**

Aged Care Assessment Team
Kintore St
Katherine NT 0850
Tel 08 89738778 Fax 08 89738983
## AGED CARE SERVICES

**Tennant Creek**

Aged Care Assessment Team  
Tel 08 89624201

**Nhulunbuy**

Aged Care Assessment Team  
Tel 08 89870404

## ALCOHOL AND OTHER DRUG SERVICES

**Alice Springs**

**Alcoholics Anonymous**  
PO Box 978 Alice Springs NT 0870  
Tel 08 89530802  
Meetings at various sites

**ADSCA**  
2 Stuart Terrace  
PO Box 721 Alice Springs NT 0871  
Tel 08 89517580 Fax 08 89517585

**Alcohol and Other Drug Services**  
Stuart Terrace  
Tel 08 895117580 Fax 08 89117585

**Bush Mob**  
4 Schwartz Cres  
Tel 08 89533798

**Central Australian Aboriginal Alcohol Planning Unit (CAAAPU)**  
290 Ragonesi Rd  
Tel 08 89555336 Fax 08 89555385

**Central Australia Youth Link Up Service (CAYLS)**  
Tangentyere Council  
4 Elder St  
Tel 08 89514236

**DASA/Aranda House**  
Aranda House, 7 Kempe St  
Tel 08 89531062 Fax 08 89532527

**DASA Sobering Up Shelter**  
4 Schwartz Cresent  
Tel 08 89528412 Fax 08 89534686  
AH 08 89534044

**Holyoake**  
21 Newland St  
PO Box 1052 Alice Springs NT 0871  
Tel 08 89525899

**Darwin**

**Alcohol Awareness and family Recovery.**  
18 Geranium St The Gardens  
Tel 08 89243200 Fax 08 89243299

**Alcoholics Anonymous**  
18 Bauhinia St Darwin  
Tel 08 89485202

**Alcohol and Other Drug Services**  
Royal Darwin Hospital  
Tel 08 89222839 Fax 08 89228403

**Amity Community Services Inc**  
155 Stuart Highway Parap  
Tel 1800684372 Fax 08 89818456

**Banyan House**  
Berrimah  
Tel 08 89470832 Fax 08 89471093

**Bridge Programme**  
Lot 5043 Salonika St  
Stuart Park NT 0820  
Tel 08 89814199 Fax 08 89811184
CAAPS (Council for Aboriginal Programme Services (inc)
60 Boulter Rd Berrimah
Tel 08 89224800 Fax 08 89224833
Freecall 1800894800

Sobering Up Shelter
Tel 08 89480793

Darwin Withdrawal Services
2 Caryota Crt Coconut Grove
Tel 08 89480087 Fax 08 89482525

FORWAARD
33 Charles St Stuart Park
Tel 08 89236666

Katherine

Alcohol and Other Drug Services.
Government Centre 1
Tel 08 89738402 Fax 08 89738592

Tennant Creek

Alcohol and Other Drug Services
Tennant Creek Hospital
Schmidt St
Tel 08 89624282 Fax 08 89624420

BRADAG
29 Stanton St
Tel 08 89621912 Fax 08 89622896

CARER SUPPORT SERVICES

Alice Springs

Carers NT Inc
Westpac Breezeway Todd Mall
PO Box 4929 Alice Springs NT 0871
Tel 89531669 Fax 08 89531669
Freecall 1800242636

Carer Respite Centre
Shop 6 Cinema Complex Todd Mall
PO Box 4577 Alice Springs NT 0871
Tel 08 89532899 Fax 08 89532911

Mental Health Carers NT
Tel 08 89531467

Darwin

Mental Health Carers NT
PO Box 40556 Casuarina NT 0811
Tel 08 89481051 Fax 08 89482473

Carers NT
The Clocktower
5/1 Caryota Court Coconut Grove
Tel 08 8948 4877

COMMUNITY VISITOR PROGRAM

9-11 Cavenagh Street, Darwin
LMB 22 GPO, Darwin NT 0801
Tel 08 89991451 Fax: 08 89813812
TTY 08 89991466
Freecall: 1800021919
Email cvpprogramadc@nt.gov.au

ANTI-DISCRIMINATION COMMISSION

LMB 22 GPO Darwin NT 0801
Tel 08 89991444 Fax 08 89813812
## CONSUMER SUPPORT ORGANISATIONS

### Alice Springs

**Mental Health Association of Central Australia (MHACA)**
65 Hartley Street
PO Box 2326 Alice Springs NT 0871
Tel 08 89504600 Fax 08 89535577

#### Darwin

**GROW Darwin**
Suite 11 Rapid Creek Business Village
48 Trower Rd Millner
PO Box 42644 Casuarina NT 0811
Freecall 1800558268
Tel 08 89854799 Fax 08 89856799

**GROW Palmerston**
Brennan Electoral Office
Palmerston Shopping Centre
Tel 08 89854799 Fax 08 89856799

**TEAM Health**
Shop 30
Rapid Creek Business Village
48 Trower Rd Millner
PO Box 950 Parap NT 0804
Tel 08 89484399 Fax 08 89484055
STD 1300780081

**TEMHCO**
Tel 08 8999 4909

### Katherine

**GROW**
1/17 First Street
PO Box 509 Katherine NT 0851
Tel/Fax 08 89713344

## COUNSELLING SERVICES

### Alice Springs

**Anglicare**
16 Hartley St
PO Box 2579 Alice Springs NT 0871
Tel 08 89518000 Fax 08 89518016

**Centacare NT**
8 Hartley Street
PO Box 832 Alice Springs NT 0871
Tel 08 89529730 Fax 08 89533008

**Employee Assistance Scheme (EAS)**
1st Floor Eurlipa House
Tel 08 89534225 Fax 08 89 536894

**Catherine House**
86 Hartley Street
Tel 08 89526048 Fax 08 89525207

**Central Australian Aboriginal Congress Inc.**
**Social and Emotional Wellbeing.**
25 Gap Rd
Tel 08 89514457 Fax 08 89523397

**Relationships Australia**
4/11 Railway Terrace
PO Box 8367 Alice Springs NT 0871
Tel 08 89504100 Fax 08 89525878
Free call remote areas 1800634405

### Darwin

**Anglicare Darwin Head Office**
5 Nermakuk Drive Ludmilla
PO Box 36506 Winnellie NT 0821
Tel 08 898500

**Resolve**
1/5 Goyder Rd Parap
Tel 08 89464800 Fax 08 89464801
Centacare Darwin
17 Hidden Valley Rd Berrimah
Tel 08 89442000 Fax 08 89442099

Centacare Palmerston
Shop 10B Ground level
Goyder Centre
PO Box 3081 Palmerston NT 0831
Tel 08 89329977 Fax 0889326590

Danila Dilba Emotional & Social Wellbeing
3/1 Malak Place Malak
Tel 08 89279335 Fax 08 89479002

Relationships Australia
2nd Floor Cavanagh Centre
43 Cavanagh St
GPO Box 4193
Tel 08 89234999 Fax 08 89816190
Free call 1300364277
Free call remote areas 1800634405

Somerville Darwin
147 Lee Point Rd Wagaman
PO Box 42644 Casuarina NT 0811
Tel 08 89204100 Fax 08 89204101

Somerville Palmerston
3 Bonson Terrace Moulden
PO Box 42644 Casuarina NT 0811
Tel 08 89351500 Fax 08 89351501

Katherine

Anglicare
15 Third Street
PO Box 415 Katherine NT 0851
Tel 08 89721571 Fax 08 89712794

Centacare Katherine Family Link
Cnr Giles & First Sts
PO Box 919 Katherine NT 0851
Tel 08 89710777 Fax 08 89711400

Health and Community Services Complaints Commission
GPO Box 1344 Darwin NT 0801
Tel 08 89991969 Fax 08 89991828
Free call 1800806380
Email hcscc.omb@nt.gov.au

Legal Services

Alice Springs
Central Australian Aboriginal Family Legal Unit (CAAFLU)
84 Hartley St
Tel 08 89536355 Fax 08 89536749
Free call 1800088884

Central Aboriginal Legal Aid Service (CAALAS)
55 Bath St
Tel 08 89522933

Central Australian Legal Aid Commission
77 Hartley St
PO Box 969 Alice Springs NT 0871

Central Australian Women’s Legal Service
3/15 Leichhardt Terrace
Tel 08 89524055 Fax 08 89524033

Domestic Violence Legal Service
Suite 3, 15 Leichhardt Terrace
PO Box 3496 Alice Springs NT 0870
Tel 08 89521391
### Useful Contacts & Services

<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Phone Numbers</th>
<th>Fax Numbers</th>
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<tbody>
<tr>
<td><strong>NT Legal Aid Commission</strong></td>
<td>77 Hartley Street PO Box 969 Alice Springs NT 0871</td>
<td>Tel 08 89515377 Fax 08 89515378</td>
<td>Freecall 1800019343</td>
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<tr>
<td><strong>Darwin</strong></td>
<td><strong>NT Legal Aid Darwin</strong> Level 6, 9-11 Cavenagh Street</td>
<td>Tel 08 89993000 Fax 08 89993099</td>
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<tr>
<td><strong>Palmerston</strong></td>
<td><strong>NT Legal Aid Palmerston</strong> Shop 6 Goyder Centre 25 Chungwah Terrace</td>
<td>Tel 08 89994750 Fax 08 89994747</td>
<td>Freecall 1800019343</td>
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<tr>
<td><strong>Aboriginal Legal Aid</strong></td>
<td>1 Gardiner St Darwin GPO Box 1064 NT 0801</td>
<td>Tel 08 89815266 Fax 08 89825195 (Criminal) 08 89825199 (Civil) Freecall 1800898251 Mobile (AH) 0410 633 261</td>
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<tr>
<td><strong>Katherine</strong></td>
<td><strong>North Australian Aboriginal Justice Agency</strong> PO Box 1944 Katherine NT 0851</td>
<td>Tel 08 89721133 Fax 08 89710381 (Criminal) 08 89825199 (Civil) Freecall 1800897728 Mobile (AH) 0407 412 426</td>
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<tr>
<td><strong>Nhulunbuy</strong></td>
<td><strong>Aboriginal Legal Services</strong> PO Box 120 Nhulunbuy NT 0881</td>
<td>Tel 08 89871300 Fax 08 89871344 Freecall 1800022823 Mobile (AH) 0417 883 879</td>
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<tr>
<td><strong>Tennant Creek</strong></td>
<td><strong>Domestic Violence Legal Service</strong> Tel 08 89819726</td>
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<tr>
<td><strong>Mental Health Review Tribunal</strong></td>
<td>Level 1, Nichols Place Cnr Cavenagh and Bennett Streets Darwin PO Box 1281 Darwin NT 0801</td>
<td>Tel 08 8999 5002 Fax 08 8999 5005 Email: <a href="mailto:mentalhealthreviewtribunal@nt.gov.au">mentalhealthreviewtribunal@nt.gov.au</a></td>
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<tr>
<td><strong>Alice Springs</strong></td>
<td><strong>Ombudsman NT</strong> Gnd Foor Centrepoint Building, Hartley St PO Box 2388 Alice Springs NT 0871</td>
<td>Tel 08 89515818 Fax 08 89515828 Email <a href="mailto:hcscc.omb@nt.gov.au">hcscc.omb@nt.gov.au</a></td>
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**50 – To the Mental Health and Related Services Act**
Darwin
12th Floor NT House, 22 Mitchell St
GPO Box 1344 Darwin 0801
Tel 08 89991969 Fax 08 89991828
Email hcscc.omb@nt.gov.au

TRANSLATING AND INTERPRETING SERVICES

Alice Springs
Aboriginal Interpreting Service
Leichardt Building 21 Gregory Terrace
Tel 08 89515576 Fax 08 89515244

Darwin
Aboriginal Interpreting Service
RCG House 83-85 Smith St Darwin
Tel 08 89998353 Fax 08 80998855

Interpreting and Translating Service NT
GPO Box 4621 Darwin NT 0801
Tel 08 89998506 OR 1800 676 254

YOUTH SERVICES

Darwin
YWCA
Freecall 1800799226

Anglicare NT
5 Nemarluk Drive Ludmilla
PO Box 36506, Winnellie NT 0821.
Tel 08 8985 0000 Fax 08 8985 0001

Headspace
Oasis Shopping Centre
Tel 08 89315999 Fax 08 89315995