

# Submission from Loddon Mallee Mental Health Carers Network December 2016

# About LMMHCN

***LMMHCN represents carers of people with Mental Health issues in the Loddon Mallee region of Victoria. We aim to take the issues that carers have to the policy makers and service providers to advocate for the improvement of services. Loddon Mallee region covers 58,961 sq kms (26%) of Victoria and has a current population of just over 300,000. The region is made up of 10 local government shires to include Macedon Ranges, Mt. Alexander, Central Goldfields, City of Greater Bendigo, Loddon, Buloke, Gannawarra, Campaspe, City of Swan Hill and the City of Mildura.***

***Many of our carers live in small towns which do not have access to Public Transport, NBN, Mental Health Services and sometimes lack of Mobile Phone Services.***

***We welcome the opportunity to provide feedback to the Department of Social Services consultation on the “Delivering an Integrated Carers Support Service”.***

# Feedback from carers in the Loddon Mallee region on the proposed delivery of the Integrated Carer Support Service:

It is pleasing to note throughout the document that the carer should be supported early in their carer role and be given support so that they feel confident in accessing services when needed.

\*Digital Services: Many carers in the Loddon Mallee region do not use computers or have a reliable internet network. There seem to be an over-reliance on this medium of information delivery for intake/education and support services.

The report does not capture the experience that many carers have in receiving adequate support and information at the crisis point of entry into a service, some of our carers would not be in their local communities at this entry point due to the isolation of where they live. It will be vital that the health professionals are well aware of the supports they can receive. Our carers have said they want the face to face support and need the personalised response to their individualised issues especially in a crisis.

# LMMHCN image.jpg

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\*Regional Hubs: There needs to be a description of the number and geographical spread of The Hubs as this is an immense role especially in coming to terms of local awareness. T This is not clearly stated in the model and gives us no insight into how this will be achieved. The communities in our region are very different and all have complex issues, it is going to be extremely important that we have local Mental Health Services who know and understand the Loddon Mallee rural landscape and its varied community’s who need to be understood at the local level. How is this going to be achieved?

\*Respite. The Integrated Carer Support Model states that Planned Respite care services would be linked but not funded directly. There seems to be no clear direction for the future of this funding. The model does not support carers with respite which is an essential component to look after their own health and well being. There needs to be more specific clarification on this service and how it will be funded and by which service. This is not clear so how will the carer or for that matter the profession services know where to access this support?

**Media release received from the Hon Jane Prentice 6/11/16. *“The focus of the draft is to provide more services to more carers to provide supports that ultimately improve their well being”.***

\*Education and Training. There is no detail re the service delivery principles and needs of the diverse carer groups. Is it up to the carer to identify their need for education and training?

\*Funding Arrangements. Funding for peer support groups appears to be through The Hubs with no clear understanding if it will be available and how it will be supported locally.

\*NDIS. The new carer model needs to take into consideration the burden that will fall on mental health carers who presently receive Carer Support Services but will no longer be eligible because the person with the lived experience of mental illness does not want to engage with the NDIS yet are eligible.



**PO Box 195** **Golden Square**

 **VICTORIA 3666**

**www.lmmhcn.org.au**