



# Mental health care in hospital

Information for carers and support people



Welcome

أهلاً وسهلاً

Benvenuti

Wanjoo

خوش آمدید

တင်တူလိပ်မုတ်

Chào mừng

Bienvenidos

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欢迎

ကြိုဆိုပါ၏။

Selamat datang



Scan QR Code to listen

Audio recording by Eliza Rushton,  
Peer Support Worker at EMHS Eating  
Disorder Specialist Services.

If you need this information translated or read out, please ask staff for support.  
This document is available in alternative formats on request.

### About this booklet

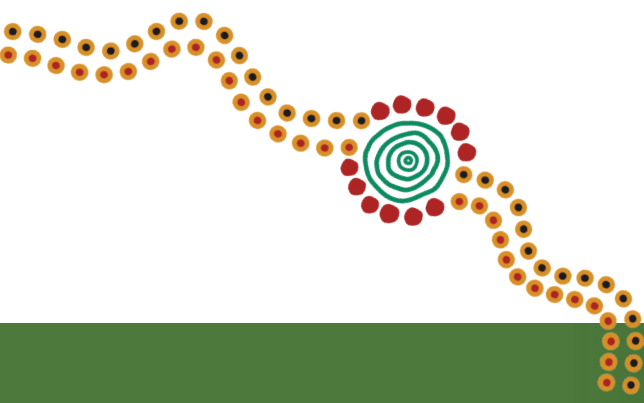
East Metropolitan Health Service (EMHS) has prepared this booklet to provide information about mental health care in hospital. The booklet was developed with people who have lived experience of supporting someone receiving mental health care and of receiving care themselves. It is designed to help you, as a carer or support person, understand what to expect while the person you support is receiving inpatient care. Inside, you will find information important to their stay including what good mental health care looks like, restrictive practices and how to address any concerns you may have.

Cover picture: Derek (middle), who has lived experience of receiving mental health care, discussing his care plan with a nurse (left) and Diane (right), who has lived experience as a carer.

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# What to expect from hospital care

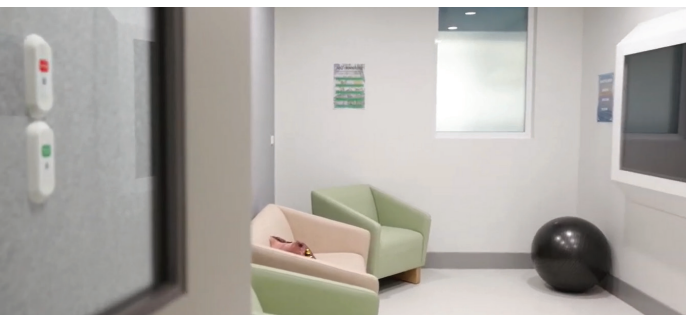
Everyone receiving mental health care has the right to be treated with dignity and respect and receive high quality care, so it is important to know what good mental health care looks like in hospital.

Mental health hospital care environments are designed to be safe, structured and therapeutic for people who need intensive support for their mental health. The hospital is staffed 24 hours a day by a range of healthcare staff, who may include:

- psychiatrists
- psychologists
- nurses
- occupational therapists
- social workers
- peer support workers
- welfare officers
- wellbeing spiritual care officers.

While you are in hospital, activities available to you may include:

- **group activities** such as mindfulness and relaxation sessions, wellbeing discussions, art and music therapy, or exercise
- **one-on-one support** time with staff to explore their unique needs, goals, and personalised strategies
- **building life skills or re-engaging in enjoyable activities** such as socialising, budgeting, cooking, crafting, or gardening
- **comfort room** time where sensory aids such as soothing music assist relaxation.



Right: Derek (left), who has lived experience of receiving mental health care, discussing his discharge plan with a nurse.  
Above: A comfort room.

## Getting extra support

Everyone deserves the same opportunities to receive the care they need. If you, or the person you support, need extra help, staff can provide different supports to meet those needs. For example, if it is easier to have information written down, staff can provide written materials, or if English is not a first language, staff can arrange for an interpreter.

Staff will work with you and the person you support to ensure any cultural needs or preferences are included in their care. This might include:

- specific diet choices (such as vegetarian or Halal)
- cultural practices or rituals (such as prayers or traditional healers)
- helping them access spiritual support (such as chaplains or Elders).

You, and the person you support, are encouraged to talk with staff about any needs and preferences so everyone can work together to see how they can be met.



# The rights of carers and support people

The **Carers Recognition Act (2004)** acknowledges the crucial role of carers and support people in the community. It includes the **Western Australian Carers Charter** which empowers carers and support people to be involved in care through the below 4 principles:

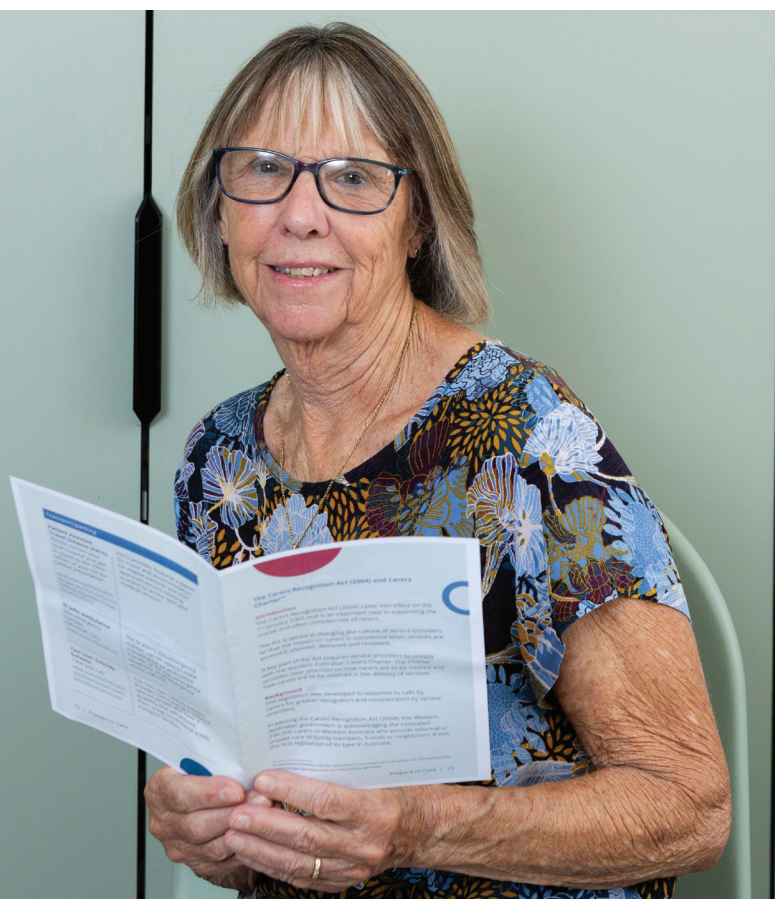
- **Respect and dignity** – carers and support people must be treated with respect and dignity in all interactions.
- **Recognition of their role** – carers and support people must be recognised in the assessment, planning, delivery, and review of services that affect them and the person they support.
- **Consideration of their views** – the views and needs of carers and support people must be considered alongside the views, needs, and best interests of the person they support.
- **Attention to complaints** – formal complaints from carers, support people and the individuals they support will be acknowledged within 5 working days, investigated and resolved as promptly as possible – ideally within 30 working days – in the best interests of all parties.

## Respecting privacy and confidentiality

If the person you support has capacity, they have the right to decide who is involved in their care, including involvement of carers and support people. Staff are not able to share private, specific information about the person without their permission, **even with carers and support people.**

The Carers Recognition Act encourages staff to communicate effectively and involve carers and support people where appropriate, but always with respect for the consent and right to privacy of the person receiving care.

The person you support may give permission for you to be included in all, some, or no conversations about their specific care and treatment. However, even if they do not provide consent, you can still speak to staff about general aspects of their care. Staff will also regularly revisit the topic with the person to see if they have changed their mind.



“

I know from my daughter's experience that she needed me as a carer who could speak for her, which was really important for her at that point in time.

”

Diane, carer

# Collaborative care

Collaborative care means staff will work with you and the person you support to identify the best ways they can provide care. Staff support and recognise the value of your involvement and will actively seek to involve you in care discussions.

Discharge planning is an example of an important care discussion where staff will seek your involvement, with the consent of the person receiving care. Discharge planning aims to ensure a smooth transition back into the community and can include connecting the person with services to help support their needs. It will begin when the person you support is admitted, to ensure continuity of care and help make sure everyone involved in the person's care is on the same page.

Discharge planning includes considering important information about the person you support, such as:

- their goals
- follow up care and support
- medication
- their access to family, carer and other support.

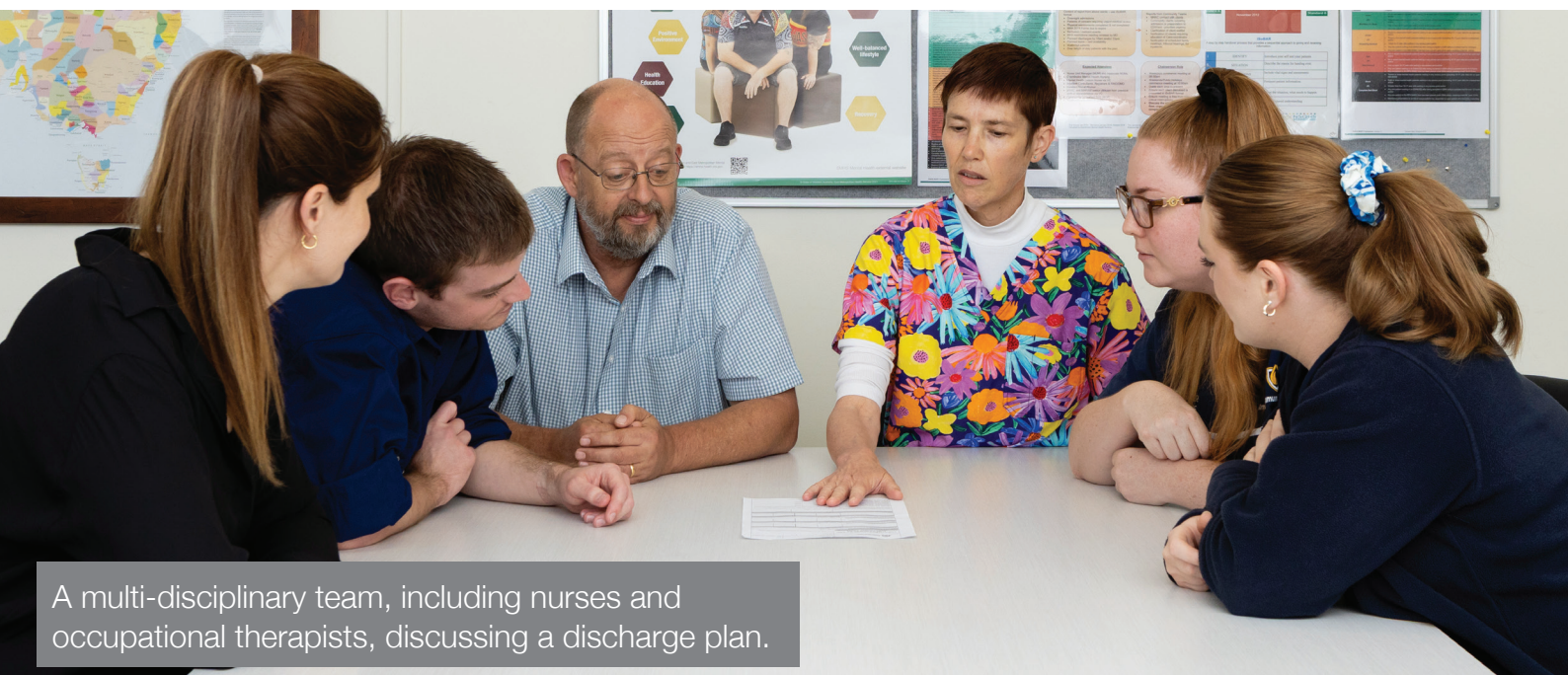
## While providing care, staff will work closely with the person you support to:

- help them feel comfortable and respected, with dignity and fairness
- discuss consent for sharing information, and facilitate regular contact with carers and support people

- support them to express opinions and practise religious or spiritual beliefs
- provide access to support for personal needs (such as gender, age, culture and social support)
- ensure they understand their rights
- involve carers and support people in care decisions (with consent)
- treat them as a person, rather than a diagnosis, and focus on their strengths and abilities
- create a calm, supportive environment and help them adjust to the hospital setting
- offer enjoyable activities such as exercise, art, and crafts.

Care will be provided in line with the *Mental Health Act 2014* and in a way that respects the rights of the person you support.

If you have questions or concerns about the care being provided, or if there is anything you think can be improved, it is important to speak with a staff member. If you feel your questions or concerns have not been resolved, you may wish to reach out to the Mental Health Advocacy Service (see page 12 for details).



A multi-disciplinary team, including nurses and occupational therapists, discussing a discharge plan.

# Your role as a carer or support person

As a carer or support person, you play an important role in the care team. Here are ways you can help the person you support get the best care.

- **Advocacy** – As a carer or support person, your role may involve speaking up on behalf of the person you support, especially when they do not feel comfortable doing so themselves. For example, you can request a family meeting with staff and the person you support to discuss their care or raise any concerns.
- **Actively participate in their care** – Engage openly with the care team by asking questions and sharing your thoughts and concerns with staff. For example, you might request more information about a recommended medication for the person you support. Your involvement plays a key role in developing a personalised care plan that best meets their needs.
- **Engage with staff and other people in a positive and respectful manner** – This helps everyone feel comfortable.
- **Communicate needs and preferences** – Whether it is religious, cultural, or personal preferences, letting staff know what is important to the person you support helps us provide care that aligns with their values.
- **Help maintain a caring and comfortable environment by being respectful and supportive.** If the person you support feels uncomfortable or recognises their actions affecting others, speak to staff immediately – open communication ensures concerns are addressed quickly and keeps the hospital welcoming for everyone.



I was in the ward, and I was making gestures at the nurse's station, and then we had a family meeting, and I was gesturing in the family meeting, and the doctor was saying 'Oh she's just been doing that', but my Mum could recognise what I was doing and was able to tell the team that I was actually using sign language.



Tegan, lived experience of mental health care.

## Looking after yourself

Caring for and supporting someone with mental health challenges can be hard. It's normal to feel a range of emotions, including fear, guilt, uncertainty, helplessness, and frustration. To avoid burnout, it's important to look after your own physical and emotional needs too. Remember to take time out when you need it and continue to do things you enjoy.

For more information on looking after yourself as a carer or support person, go to this resource or scan the QR code:

<https://www.healthdirect.gov.au/supporting-someone-with-a-mental-illness>



## Care and treatment options

**If the person you support is receiving care voluntarily**, they have the right to decline any care options they are not comfortable with. Staff will talk through the available options to help them make the decision that's right for them. They will have time to think about their options or choose a different one that feels right for them. As a support person, you have the right to be included in these conversations, depending on the consent provided by the person you support.

**If the person you support is receiving care under the Mental Health Act**, they can be

provided with treatment even if they do not agree with it. Because of this, it is even more important for staff to support them, and you, to understand their treatment, why it is needed, and how it will be provided. Even if care is being provided under the Mental Health Act, staff will always listen to the opinion of the person you support and take it into account as much as possible.

As a support person, you can always ask staff about the treatment being provided, any use of the Mental Health Act, and any other aspects of care.

## Personalised support

Creating a supportive environment is a shared responsibility between support people receiving care, staff and visitors. Staff work with each person receiving care to develop a personalised safety plan that reflects their needs and experiences.

A safety plan may include:

- triggers
- early warning signs
- what coping strategies work for the person you support
- how support people can help
- contact numbers for crisis lines.

As the person's carer or support person, you may notice things they are not aware of themselves, such as warning signs and behaviours that

indicate they are feeling distressed. Your input into the safety plan can help ensure it is meaningful, effective, and centred around what matters to them.

You and the person you support will get a copy of the safety plan to take home. This can be helpful in situations when they might need to be reminded about their coping strategies or how to get extra support. It is important you understand your role in the safety plan.



Derek, lived experience of receiving mental health care, discussing his safety plan with staff.

“

I like 'pre-plans', for example 'when I am distressed, I would like.....' or 'signs that I am struggling are xyz'. I like it when there's an understanding/ plan of what to do agreed by all parties. It's good to be able to go to a plan and know what to do. Sometimes I've had a particular chair near the nursing station that when I sit in it, it was a sign to the staff that I required assistance.

”

Tegan, lived experience of mental health care.

# Restrictive practices

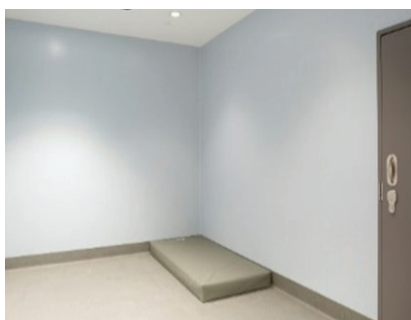
Restrictive practices are **any action that restricts the rights or freedom of movement of a person**. While the person you support is receiving hospital care, they may experience, or see other people experience, restrictive practices.

East Metropolitan Health Service is committed to reducing, and where possible, eliminating the use of restrictive practices. However, there may be some situations where restrictive practices are the only option to keep people safe, including people receiving care, visitors, and staff.

## Types of restrictive practices

In a situation **where all other options to keep a person safe have been unsuccessful**, restrictive practices may be used by trained staff, and they may sometimes ask security staff to assist. The following restrictive practices may be used in these situations.

- **Seclusion** is when a person is left alone for a period of time in a room they cannot freely leave. A seclusion room has been removed of anything that may be used to self-harm and has minimal furniture, to support the safety of the person in the room. While this experience can be distressing, staff provide ongoing monitoring of the person's health and safety during seclusion.
- **Physical restraint** is when a person's movement is restricted by another person.



A seclusion room

## When seclusion or restraint may be used

The use of seclusion and restraint in Western Australia is regulated under the Mental Health Act. In line with this, trained staff only use seclusion and restraint when:

- there is an immediate risk of harm to the person themselves, or someone else
- all other ways to support someone have been tried and have not worked.

## How health and safety is prioritised during seclusion or restraint

**Ongoing monitoring:** While seclusion or restraint is in place, staff will closely monitor the person involved to ensure their safety and wellbeing. This includes regular physical checks and ongoing observation to respond quickly to any changes.

**Time limited:** Seclusion or restraint is only used for the shortest time necessary. As soon as it is safe for everyone, the seclusion or restraint will end.

**Review and documentation:** The Mental Health Act requires every seclusion or restraint event be documented and reviewed by the mental health service and the documentation provided to the Office of the Chief Psychiatrist of Western Australia. This ensures compliance with safety and legal regulations and supports care improvement within the service.

## What to expect if a seclusion or restraint occurs

If the person you support experiences a seclusion or restraint, staff will:

- frequently check their physical and emotional wellbeing
- remain engaged with them
- provide access to food, drink, and toilet facilities
- support and respect their dignity
- provide them with information about the seclusion or restraint and how safety can be maintained for everyone.

If you any have any concerns, please let staff know immediately.

## After a seclusion or restraint, staff will:

- inform you about what happened
- support everyone to process what has happened
- offer to talk with you and the person you support about what happened, and how everyone can work together to avoid a similar thing happening again.

Experiencing or witnessing seclusion or restraint can be distressing. If the person you support experiences a seclusion or restraint (including seeing other people experience it), staff will offer to talk with you both about what happened. The person you support can choose to talk whenever they feel comfortable, including after they have been discharged. They can also choose not to talk to staff about the event or they can write about what happened if this is preferred.

The person you support may also ask you to speak to staff on their behalf. As a support person, you have a right to do this.

You can expect staff to check in with the person you support a few times after a seclusion or restraint.

**First, staff will check in with the person you support to see if they are okay.** They will do health checks and genuinely listen to them. If there is a staff member the person you support feels more comfortable talking with, they can ask to speak with them.

**Later, when they feel ready,** staff will talk with the person you support (and you) about how their care might be changed so a similar thing does not happen again. The goal is to have an open conversation about what happened and strengthen the partnership and understanding between the person you support, you, and the care team.

## Medication and observation

Medication may be used to assist people in reducing feelings of distress or agitation. Medication may first be offered as a tablet or may be required to be given as an intramuscular injection. Intramuscular injection means the medication will be injected into the muscle, usually in the buttocks.

If medication is given, staff will regularly check in with the person you support to make sure they are comfortable and well. This includes physical observations, such as blood pressure, breathing rate, and pulse. It is important to work with staff so they can complete these observations to maintain the safety and wellbeing of the person you support.

**If you, or the person you support, have concerns about medications at any point please let staff know straight away. Maintaining open communication helps ensure appropriate care and support.**

“

The painting represents the different stages of growth – there’s a blooming flower, there is one that’s just starting to blossom, there is one that isn’t quite ready to bloom yet and still a little closed – they are all at different stages.

”

Eliza Rushton, the artist and Peer Support Worker at East Metropolitan Eating Disorder Specialist Service



## Talking about mental health care

Adjusting to the hospital environment can be challenging for people receiving care, carers and support people. If you are unsure how to start a conversation about what the person you support is experiencing, here are some suggestions.

These conversation starters can help you talk with the person you support about their care – what is working well and what might need improvement.

- Do you have a calm place where you feel comfortable and able to take part in activities?
- Do you feel you are treated kindly and fairly?
- Do you have an opportunity to talk with staff about your care?
- Do you feel you are heard and understood about what you like and do not like?
- Do you feel supported to make decisions about your care?
- Is there additional support available if you need it (for example, written information if this is easier to understand)?

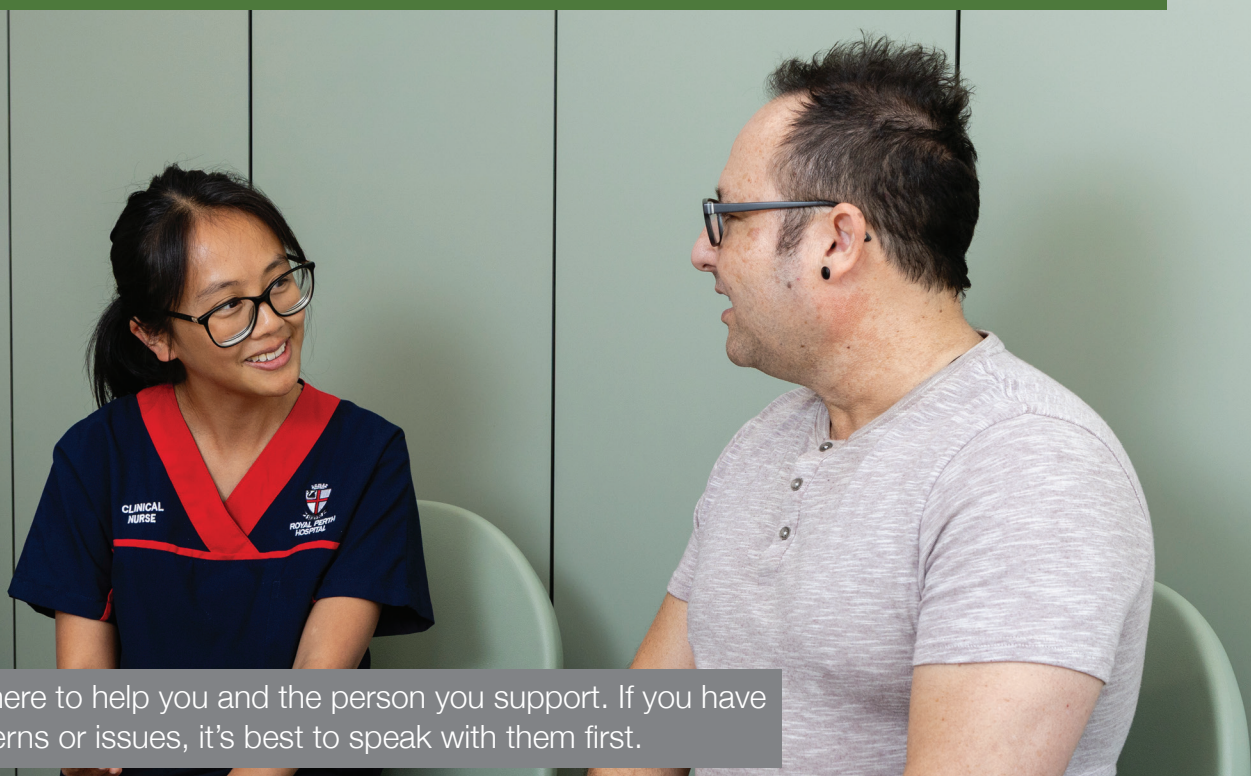
## What you can do if you have concerns

If you or the person you support have concerns about the care being provided, including any restrictive practices, it is important to tell someone.



### People you can speak to

- Any staff on the ward
- The Mental Health Advocacy service
- An Aboriginal health liaison officer
- Peer support workers, or carer peer workers (if available)
- Cultural advocates in your community (for example, Elders)
- A spiritual or religious leader or wellbeing spiritual care officer
- Carer advocates, such as Carers WA
- Care coordinator, if the person you support has one



Staff are here to help you and the person you support. If you have any concerns or issues, it's best to speak with them first.

# Raising a concern

If you believe the care provided is not meeting the needs of the person you support, you can raise a concern on their behalf or support them to do it themselves. This could include a concern about something that has happened, or something that has not happened when it should have.

**The below process outlines how to escalate your concern if it is not resolved.**

1

## Speak to hospital staff

Discuss your concerns as soon as possible with hospital staff involved in the care of the person you support. They can explore potential solutions or alternative approaches that may address your concerns. Points of contact may include their shift nurse, nurse unit manager, occupational therapist or the psychiatrist.

2

## Contact the health service directly

You can speak to staff to provide feedback directly at any time. For more information, about providing feedback, you can contact:

### Armadale Health Service

Monday to Friday, 8 am to 4 pm.

Phone: (08) 9391 1153.

Email: [AKG\\_ConsumerLiaison@health.wa.gov.au](mailto:AKG_ConsumerLiaison@health.wa.gov.au)

### Royal Perth Bentley Group

Monday to Friday, 8 am to 4 pm.

Phone: (08) 9224 1637

Email: [RPBG.Feedback@health.wa.gov.au](mailto:RPBG.Feedback@health.wa.gov.au)

3

## Contact the Mental Health Advocacy Service

The Mental Health Advocacy Service offers a free service supporting people who are receiving care as an involuntary patient or have been referred for examination by a psychiatrist. They help them understand and exercise their rights and can also assist in the process of making a complaint. Mental health advocates are independent from hospitals and mental health services. Carers and support people can also contact the Mental Health Advocacy Service on behalf of the person they support.

Scan the QR code below for more information about this service and who is eligible.

You can also visit the Mental Health Advocacy Service web page at

<https://www.wa.gov.au/organisation/mental-health-advocacy-service>

Phone: 1800 999 057 or 61 8 6234 6300.

Monday to Friday, 8:30 am to 4:30 pm.



4

## Contact Health and Disability Services Complaints Office (HaDSCO)

If you are not happy with the outcome from the previous steps, you may wish to contact HaDSCO to share your concerns and ask for advice on what steps you can take to resolve the issue.

Phone: 1800 813 583.

Monday to Friday, 8:30 am to 4:30 pm.

# Mental health crisis services

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**For immediate assistance with life threatening situations call 000.**

Available 24 hours a day, 7 days a week.

Triple zero callers may be connected to the Mental Health Ambulance Co-Response – a team of mental health professionals and paramedics who provide in-person support to people aged 16 and above during a mental health crisis.

## Mental Health Emergency Response Line (MHERL)

MHERL provides 24-hour telephone crisis support from a qualified mental health clinician for people living in the Perth metropolitan area experiencing a mental health crisis and those supporting them.

### MHERL provides:

- crisis support, planning and brief intervention for people experiencing a crisis, or their support people
- support to navigate mental health services
- general information and advice.

If more than telephone support is needed, MHERL can connect you with mental health or emergency services for face-to-face contact.

### How to contact MHERL

You can call MHERL on:

- 1300 555 788 (Perth)
- 1800 676 822 (Peel region)

### Rurallink

An after-hours telephone service for people in rural and regional Western Australia experiencing a mental health crisis.

Telephone: 1800 552 002

Available: 4:30 pm to 8:30 am on weeknights, and 24 hours on weekends and public holidays.

<https://emhs.health.wa.gov.au/Hospitals-and-Services/Mental-Health-Alcohol-and-Other-Drugs/Inpatient-and-Other-Services/Rurallink>



# Our mental health services

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For more information about mental health services at East Metropolitan Health Service visit our website at <https://emhs.health.wa.gov.au/Hospitals-and-Services/Mental-Health-Alcohol-and-Other-Drugs> or scan the QR code.



For more information about mental health services in Western Australia, visit the Mental Health Commission website at <https://www.mhc.wa.gov.au/> and click on the 'Getting Help' tab, or scan the QR code.



# Other services and organisations that can help

## Aboriginal health liaison officers

Aboriginal health liaison officers provide cultural support to people receiving care in hospital. This may involve supporting treating teams with their communication with Aboriginal people, providing emotional support, and ensuring hospital staff understand the Aboriginal person's

cultural needs. They also assist with linking people receiving care to Aboriginal services in metropolitan and regional communities.

Staff, people receiving care, or families and support people may contact an Aboriginal health liaison officer at the relevant health service.



Our friendly Aboriginal Health Liaison Officer team at Armadale Kalamunda Group



Our friendly Aboriginal Health Liaison Officer team at Royal Perth Bentley Group



### Royal Perth Hospital and Bentley Health Service Aboriginal Health Liaison Officers

Telephone: 9224 2711  
Monday to Friday, 8 am to 4 pm

### Armadale Health Service Aboriginal Health Liaison Officers

Telephone: 9391 2000  
Monday to Friday, 7.30 am to 5 pm  
Saturday and Sunday, 9 am to 5 pm



## Safe Haven

Safe Haven is a quiet space offering early intervention distress management and problem-solving support from peer and clinical staff. It has support for people who may otherwise attend an emergency department, but do not need intensive clinical and medical support. No referral is required, walk-ins welcome.

Friday to Sunday, 3 pm to 7:45 pm.

Victoria Square, Perth. Opposite Saint Mary's Cathedral. Look for the Safe Haven sign and press the intercom on the door to enter.

Email: [RPHSafeHaven@health.wa.gov.au](mailto:RPHSafeHaven@health.wa.gov.au).

Telephone: 9224 3727 (only available during opening hours).



## Care Opinion

Care Opinion facilitates transparent, two-way feedback about personal experiences of care via an online public platform. This helps health services identify things they are doing well, and areas for improvement.

<https://www.careopinion.org.au/>



## Health Consumers' Council (WA)

Advocacy and support

Telephone: 1800 620 780.

Monday to Friday, 9 am to 4:30 pm.



## Consumers of Mental Health WA

Voice of mental health consumers

Telephone: (08) 9258 8911.

Monday to Friday, 9 am to 5 pm.



## Carers WA – [www.carerswa.asn.au](http://www.carerswa.asn.au)

Counselling: 1800 007 332. Monday to Friday, 8:30 am to 7:30 pm.

General information: 1300 227 377 or 08 9228 7400.

Monday to Friday, 8:30 am to 4:30 pm.

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## Armadale Health Service – Chaplaincy and Pastoral Care

Armadale Health Service's non-denominational chaplaincy service provides spiritual and religious care for staff, patients and visitors of all ages and ethnic groups.

Telephone: 9391 2000.

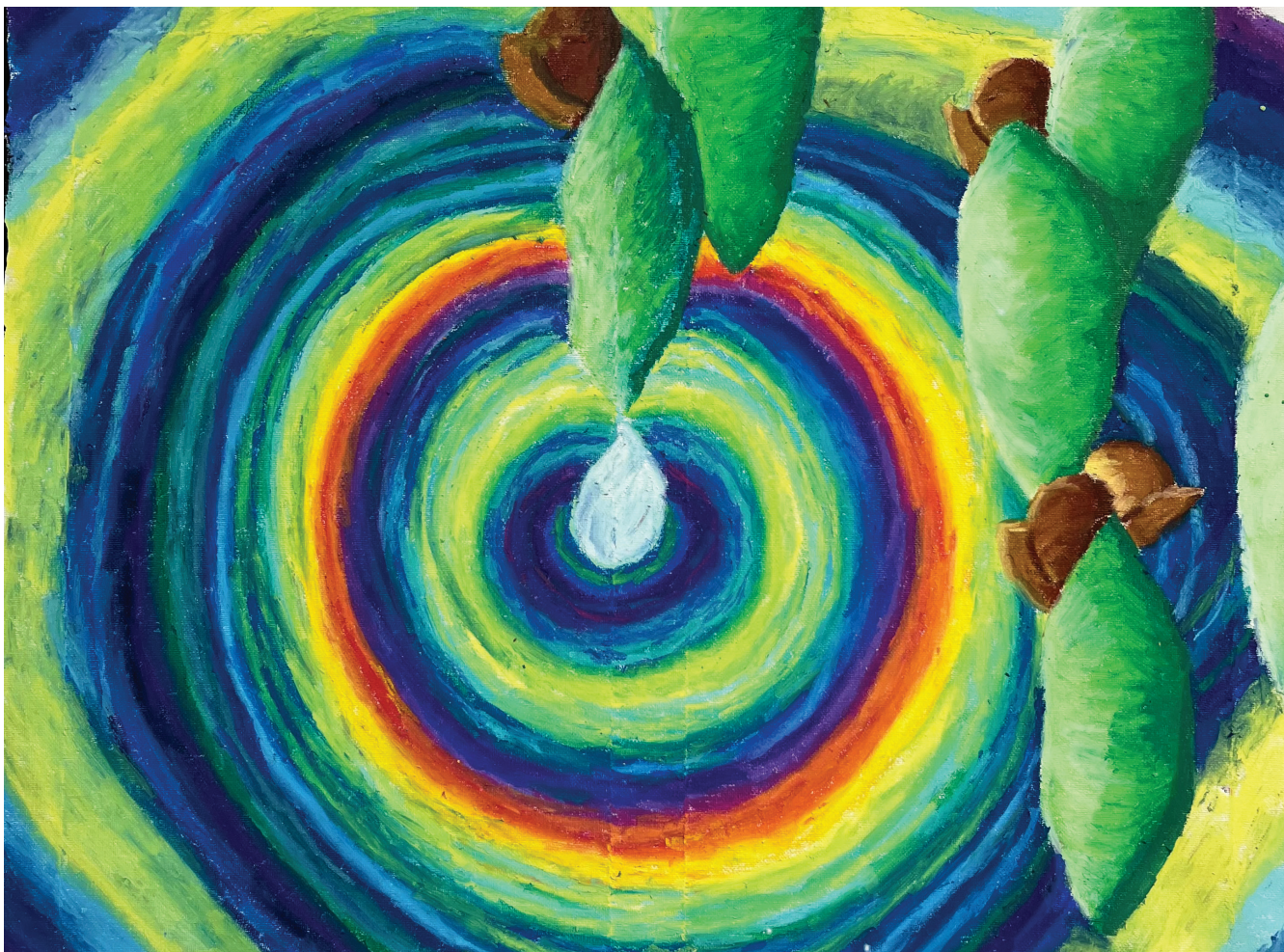
Monday to Friday, 8:30 am to 4:30 pm.

## Royal Perth Bentley Group – Centre for Wellbeing and Sustainable Practice

Wellbeing spiritual care officers are available at Royal Perth and Bentley hospitals for emotional and spiritual support. Everyone can access the services regardless of religion, race, ethnicity or gender. Wellbeing services include supporting a person's physical, mental, emotional, and social needs. Spiritual and religious needs are also supported if requested.

Telephone: 9224 2482 (voicemail is monitored).

Monday to Friday, 8:30 am to 4:30 pm.



“ You never know how much something affects you, or those around you, even if it feels like just a drop. Sometimes that drop creates a ripple effect, and you may never know the full extent of its impact.”

Tegan, who has lived experience of mental health care, painted the artwork on this page.

”



### East Metropolitan Health Service

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[www.emhs.health.wa.gov.au](http://www.emhs.health.wa.gov.au)

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