



Mental health care in hospital

Information for people receiving care



Welcome

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Benvenuti

Wanjoo

خوش آمدید

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Chào mừng

Bienvenidos

ยินดีต้อนรับ

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.

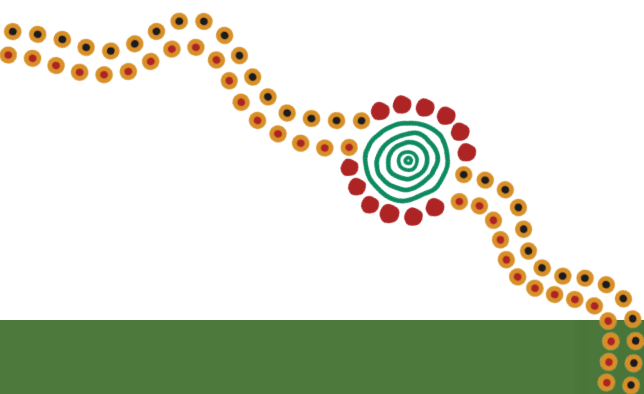
About this booklet

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 understand what to expect while you are receiving inpatient care. Inside, you will find information important to your stay including what good mental health care looks like, restrictive practices and how to address any concerns you may have.

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

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What to expect from hospital care

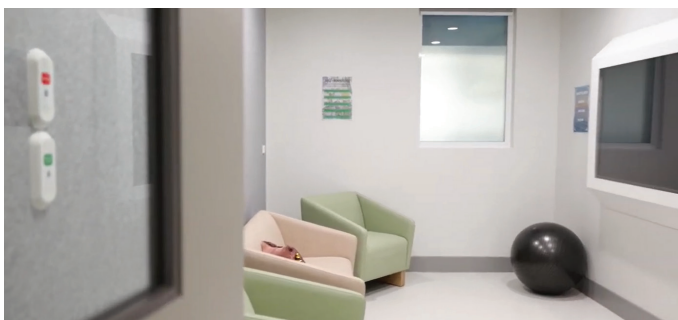
Everyone receiving mental health care has the right to be treated with dignity and respect and receive high quality care, so it is important to know what good mental health care looks like in hospital.

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, art and music therapy or exercise
- **one-on-one support** time with staff to explore your unique needs, goals, and strategies
- **building life skills** or re-engaging in activities you might enjoy such as socialising, budgeting, cooking, crafting, or gardening
- **comfort room** time where sensory aids, such as soothing music, assist relaxation.



Coming into a hospital can be challenging for you and your support people. All the staff are here to assist and work with you. If there is anything you or your support people need during this time, please let staff know.

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

Extra support if you need it

Everyone deserves the same opportunities to receive the care they need. If you need extra help, staff can provide you with different support that meets your needs. For example, information can be written down for you, or if English is not your first language, they can arrange for an interpreter.

If you have cultural needs or preferences, staff will work with you to incorporate them into your care. This might include:

- specific diet choices (such as vegetarian or Halal)
- cultural practices or rituals (such as prayers or traditional healers)
- helping you to access spiritual support (such as chaplains or Elders)
- involving your support people or community members in your care decisions, if you would like them to be involved.

Talk with staff about your needs and preferences so you can work together to meet them.



Collaborative care

Collaborative care means staff will work with you and your support people to identify the best ways they can provide support, care, and treatment. Care will be provided in line with the *Mental Health Act 2014* and in a way that respects your rights. There are also good practice guidelines which support staff to work with you in ways that are shown to be effective and useful.

Many people find it helpful to involve their support people in their care. However, if you would rather your support people are not involved, staff will respect your decision. Staff will revisit this decision throughout your care to see if you have changed your mind. More information for support people is available in our Information for Carers and Support People booklet.

Discharge planning is an example of an important discussion where staff will involve you and your support person. To support your smooth return to the community, planning may include connecting you with services to help support your needs. It will begin when you are admitted, to ensure continuity of care and help make sure everyone involved in your care is on the same page. Discharge planning includes considering important information about you, such as:

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

Example: If you are unable to drive or get to appointments without support, this needs to be considered in the discharge planning.

While providing care, staff will work closely with you to:

- support you to stay safe and well
- create a respectful relationship with dignity and fairness
- discuss how you can give or withdraw consent for staff to share your information
- assist you to have regular contact with your support people, if you choose
- help you express your opinions and be yourself
- support you in practising your religious or spiritual beliefs
- support your access to education (if applicable)
- connect you with advocacy services if needed (see page 12)
- support your personal needs related to your gender, ethnicity, age, sexuality, disability, religion, culture, or beliefs
- Help you understand your rights while receiving mental health care in hospital.



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

To support collaborative care, staff will use good practice guidelines and work with you to:

- Provide compassionate and kind support
- involve you in all decisions about your care
- involve your chosen support people in your care (with your consent)
- treat you as a person, not a diagnosis or risk
- offer plenty of opportunities to talk with staff and feel heard
- focus on your strengths and what you can do, rather than what you might not be able to do
- try their best to make the hospital a calm and supportive environment
- help you settle into hospital
- provide opportunities for activities you enjoy, like exercise or art and craft.

If you feel any of these things could be improved, it is important to speak with a staff member, someone you trust, or reach out to your mental health advocate (see page 10 for details) so they can ensure you receive the best possible care. Your support person can also talk with staff or your mental health advocate for you.

Your responsibilities

Your responsibilities play a key role in ensuring you receive the best care and the hospital remains a safe and supportive place for everyone. These responsibilities include:

- **Actively participate in your care** – engage openly with your care team, ask questions, and share your thoughts and concerns. Your involvement will help create a care plan that works best for you.
- **Treat staff and other people in the hospital with respect and dignity** – a positive and respectful environment helps everyone feel comfortable.
- **Communicate your needs and preferences** – whether it is religious, cultural, or personal preferences, letting staff know what is important to you helps them provide care that aligns with your values.
- **Maintain a safe environment** – everyone is responsible for acting in a way that keeps themselves and others safe. This allows staff, people receiving care, and support people to work together throughout your care.
- **Share your feelings** – if you ever feel uncomfortable or recognise your actions might make others feel uncomfortable, please talk to staff right away. Open communication helps them address any concerns promptly and ensures the hospital is a supportive environment for everyone.
- **Follow our smoking, alcohol, and other drug requirements.** If you are not sure what these are, check with staff.

“ The painting represents the different stages of growth - there is a blooming flower, there is one that's just starting to blossom, and 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



If you do not agree with your care plans

If you are unsure about your care, it is understandable you might feel anxious or distressed. If you feel this way, staff will listen to your views and take the time to talk with you about your care options. Your support people can also be included in these conversations, if you choose. This is especially important when parts of your care might conflict with your culture or other preferences.

If you are receiving care voluntarily you can refuse any care options you are not comfortable with. Staff will discuss your options with you and

your support people, if you choose, so you can determine the best decision for you. You will have time to think about your options or choose another option that feels right for you.

If you are receiving care under the *Mental Health Act 2014*: you can be provided with treatment even if you do not agree with it. Because of this, it is even more important for staff to help and support you and your support people to understand your treatment, why it is needed, and how it will be provided. Even if you are receiving care under the Mental Health Act, staff will always listen to your opinion about your care and take it in to account as much as possible.

Personalised support

Creating a safe and supportive environment is a team effort between everyone in the hospital, including you, other people receiving care, staff, and visitors. Staff will work with you and your support people to develop a personalised safety plan that reflects your needs and experiences.

A safety plan may include:

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

Your input is essential in making sure your safety plan is meaningful, effective, and includes what

matters most to you. It is also helpful to have your support people involved in making the safety plan, with your permission.

You will get a copy of the safety plan to take home. This can be helpful to use in situations when you might need to be reminded about your coping strategies or how to get extra support. It is important you understand your safety plan so it can help you when you feel distressed.



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

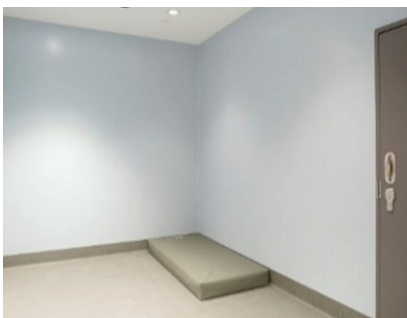
Restrictive practices are **any action that restricts the rights or freedom of movement of a person**. While you are receiving care in hospital, you may experience, or see other people experience, restrictive practices which are used to keep you and others safe.

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 you, or other people in the hospital, safe.

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 where 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 2014*.

In line with this, seclusion and restraint are only used by trained staff, when:

- there is an immediate risk of harm to yourself or others
- all other ways to support you have been tried and have not worked to keep you and others safe.

If a seclusion or restraint occurs, staff will let you know why and will be available if you need support or assistance.

How health and safety is prioritised during seclusion or restraint

Ongoing monitoring: While seclusion or restraint is in place, staff will monitor you closely to ensure your 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 2014* 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.

If you have concerns about seclusion or restraint, it is important you tell someone. You can talk to staff, your support people, the Mental Health Advocacy Service, or anyone else you trust.

What to expect if you experience seclusion or restraint

During seclusion or restraint, staff will:

- frequently check your physical and emotional wellbeing
- remain engaged with you
- provide access to food, drink, and toilet facilities

- support and respect your dignity
- provide you with information about the seclusion or restraint and how safety can be maintained for everyone.

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

After a seclusion or restraint, staff will:

- let your support people know what happened
- help you and your support people process what has happened
- offer to talk with you about what happened, and how they can work with you to avoid a similar thing happening in the future.

Experiencing or witnessing seclusion or restraint can be distressing. If you experience seclusion or restraint (including seeing other people experience it), staff will offer to talk with you about what happened.

- You can choose to have this conversation whenever you feel most comfortable. It may even be after you are discharged.
- If you would rather write about what happened instead of talking, that is okay.
- It is also completely okay if you choose not to talk to staff about the event.
- You can also ask a support person to speak to staff for you.

First, staff will check in with you to make sure you are okay. They will do health checks and genuinely listen to you. If there is a staff member you feel more comfortable talking with, you can ask to speak with them.

Later, when you feel ready, staff will talk with you – and your support people if you would like – about how your care might be adjusted so a similar thing does not happen again. The goal is to have an open conversation about what happened and to strengthen the partnership and understanding between you and your care team.

Medication and observation

Medication may be used to reduce feelings of distress and agitation. If this occurs, staff will regularly check to make sure you 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 support your safety and wellbeing.

If you feel unwell or distressed at any point after taking any medication, please let staff know straight away.

“ If you experience restrictive practices, it does not make you a bad person but you are just really unwell at that point in time. From my own experiences, I know that it can be difficult to trust staff especially when unwell and after being put in seclusion. Just know that staff are trying their best to look after you and the other people in the hospital, in a difficult situation. ”

Tegan, lived experience of mental health care.



Good Care Checklist

You can use this checklist when you talk to someone about your care. The checklist can help you think about what is going well in your care, and if there is anything you think could be changed.

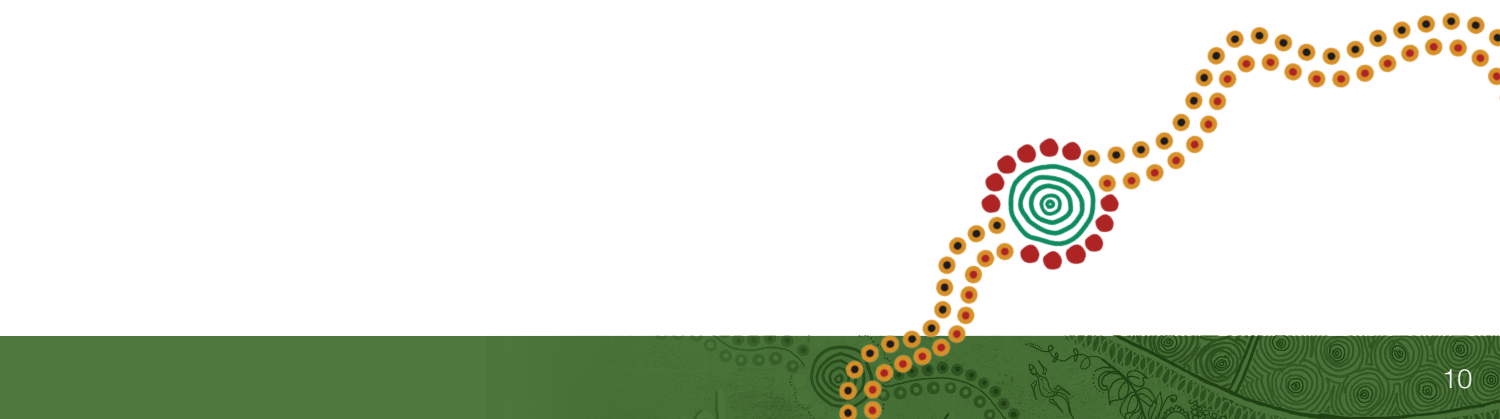
What is the environment like?

I can find a calm place where I feel comfortable and able to take part in activities.	Yes	Sometimes	Not at the moment
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Supports available

I am treated kindly and fairly.	Yes	Sometimes	Not at the moment
I have the opportunity to talk with staff about my care.	Yes	Sometimes	Not at the moment
I feel heard and understood about what I like and do not like.	Yes	Sometimes	Not at the moment
I am supported to make decisions about my care.	Yes	Sometimes	Not at the moment
There is additional support available if I need it (for example, written information if this is easier to understand).	Yes	Sometimes	Not at the moment

If you answered 'not at the moment' to any of the above, please read page 11 and 12 for how to address your concerns.



What you can do if you have concerns about your care

If you have concerns about your care, including any restrictive practices, it is important you tell someone.

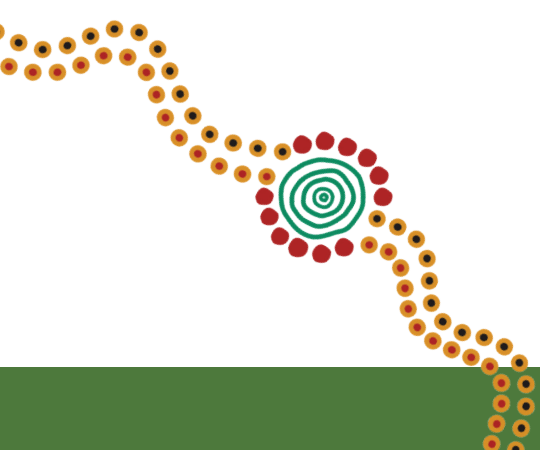
People you can speak to

- Your support people
- A staff member you trust in your hospital
- The Mental Health Advocacy Service
- A peer support worker (if available)
- An Aboriginal health liaison officer
- A spiritual or religious leader or wellbeing spiritual care officer
- A cultural advocate in your community
- Your care coordinator (if you have one)

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

Contact details

Support people (e.g. friends, family, carers)		Other: (e.g. mental health advocate)	
Name	Phone number	Name	Phone number



Raising a concern

If you believe the care provided is not meeting your needs, you can raise a concern or ask your support person to do it for you. 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 health staff

Discuss your concerns as soon as possible with hospital staff involved in your care. They can explore potential solutions or alternative approaches that may address your concerns. Points of contact may include your 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

Royal Perth Bentley Group

Monday to Friday, 8 am to 4 pm.

Phone: (08) 9224 1637

Email: RPBG.Feedback@health.wa.gov.au

3

Contact the Mental Health Advocacy Service

The Mental Health Advocacy Service offers free support to people who are receiving care as an involuntary patient or have been referred for examination by a psychiatrist. They help you understand and exercise your 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 your behalf.

The link below has more information about this service and who is eligible:

<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.

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



Health Consumers' Council (WA)

The Health Consumers' Council of WA is an independent voice advocating for people receiving health care in Western Australia. It offers a unique perspective on health policy and service delivery matters.

Telephone: (08) 9221 3422 or 1800 620 780 (country).
Monday to Friday, 9 am to 4:30 pm.



Consumers of Mental Health WA

Consumers of Mental Health WA is the independent peak body and an inclusive peer support organisation, led by and for people with lived/living experience of mental health challenges.

Telephone: (08) 9258 8911.
Monday to Friday, 9 am to 5 pm.



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/>

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.

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East Metropolitan Health Service

10 Murray Street PERTH WA 6000

Postal address GPO Box X2213 PERTH WA 6847

www.emhs.health.wa.gov.au

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