



Health

COMMUNITY OLDER PEOPLES' MENTAL HEALTH SERVICES:

A GUIDE FOR OLDER
PEOPLE WITH MENTAL
HEALTH PROBLEMS,
AND THEIR FAMILIES,
CARERS AND
FRIENDS



'We acknowledge the Traditional Owners of the land, and pay our respect to their Elders past and present'

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Introduction

This guide is about older peoples' mental health services in the community in NSW. It explains what these services do, who they provide care for, how people can access them and how they can support recovery. It answers other questions that you, your family and friends might have about these specialist services.

Later life is a time of improved mental health for many older people. Good mental health is a positive state of wellbeing that includes feeling good, functioning well, and having confidence and self-esteem. When we are mentally healthy, we cope better with life's challenges, form and maintain positive relationships, work productively and contribute to our families and communities.

Like people of any age, older people may experience problems with their mental health. Sometimes specialist mental health services are needed. Care and support can often be provided out of hospital. These services are called **Community Older Peoples' Mental Health Services** or 'OPMH' Services.

OPMH Services work with the person experiencing mental health distress and their carers to support their recovery. We have used the word 'consumer' in this guide to describe someone who is or has received care from a mental health service for their mental health difficulties. We do however try to minimise the use of this term as much as possible. The word 'you' is also used to refer to an older person with mental health

problems. 'We', 'us' and 'our staff' refer to community OPMH clinicians or services.

It is hoped that the information in this guide will help you to be an active and equal partner in your care and recovery and enable your family, carer(s) and friends to support you in this process.

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About community older peoples' mental health services

What are Older Peoples' Mental Health Services?

Older Peoples' Mental Health Services or 'OPMH Services' provide both in-hospital (inpatient) and out-of-hospital (community) care to older people with mental health problems. Our services are generally provided to people aged 65 years and over, and 50 years and over for Aboriginal people. People under 65 can also use this service if it is suitable to their needs. OPMH Services are public services provided by NSW Health.

Our staff are trained to help you with mental health problems and other health concerns associated with ageing (such as risk of falls and difficulties with remembering things).

OPMH Services have nursing and medical staff, and many also have allied health staff including social workers, occupational therapists and psychologists. We also have access to other staff and services to provide advice and assist with your needs. This may involve the coordination of care with a number of other service providers who may or may not be part of NSW Health.

Some services also have peer workers. Peer workers have personal experiences of mental distress and have used mental health services themselves, or have experience supporting a person who has used mental health services.

What do OPMH Services do?

We provide specialist care to older people who have developed, or are at risk of developing, a mental health condition. There are a range of mental health conditions where there are changes in a person's usual ways of thinking, feeling or behaving. Common types of mental health conditions include:

- **Depression** – feeling sadder or more down than usual, over a long period of time. Some people with depression may experience apathy. This is a lack of interest in life activities and/or interacting with others. It can affect your ability to complete daily tasks.
- **Anxiety** – having persistent scared or worried feelings and thoughts. Anxiety tends to impact on your day-to-day functioning and stops you from doing what you want to do.
- **Bipolar disorder** – having extreme mood swings that include emotional highs (mania or hypomania) and lows (depressive episodes).
- **Psychosis** – having disorganised thoughts, false beliefs (delusions) and/or experiencing something that is not there (hallucinations).

We also provide help to people with severe and persistent behavioural and psychological symptoms of dementia (BPSD) – also described as ‘changed’ behaviours, ‘behaviours of concern’ or behaviours that are distressing to the person with dementia and their carer(s) and family. Symptoms you may be familiar with include progressive memory loss, confusion, personality change, inability to perform everyday tasks, loss of communication skills, agitation and aggression, disturbed sleep and inappropriate social behaviour.

We provide specialist mental health assessment, diagnosis, care coordination and treatment. We explain what we mean by these terms later in this guide.

We also help you get the care you need for any physical health concerns. This may involve putting you in touch with your GP or with a public health professional such as a physiotherapist or dietitian.

We also provide information and support to carers and family members. See page 25 for further information.

Access to community mental health services

How to get help for an older person with mental health concerns



You, a family member, friend or service provider (such as your GP, aged care doctor or psychiatrist), can call the **NSW Mental Health Line on 1800 011 511**. This is a 24-hour mental health telephone access service. It is staffed by mental health professionals. They will ask you some questions to determine if you need ongoing mental health care and how urgently it is needed. Where appropriate, they can put you in contact with the most relevant local mental health service, including community older peoples' mental health services.

Sometimes, people from other services that you use, such as your GP, may choose to contact us directly. Older people with mental health problems who have used our services recently, and their carers, can also contact us directly.

How long will I wait to see someone from OPMH Services?

The mental health professionals at the Mental Health Line will let us know if they think you would benefit from ongoing care from community mental health services. Once we receive this

information, we aim to contact you, usually by phone, within 1-2 business days (Monday – Friday) to let you know that we have received your referral. If you have problems using the phone, for instance because you have a hearing difficulty, we will contact you in another way, such as sending a letter. We may phone your GP or a family member if you have consented to this during your initial discussions with the staff of the Mental Health Line.

We will usually complete your initial assessment within 2 weeks of your first contact with our service. We may complete the assessment earlier if your situation is urgent.

Where will I be seen?

You will be asked if you want to be seen in your usual place of residence (your home, hostel or nursing home), or at the hospital/health centre or another place. We will try to meet your choice where possible. If you have any particular needs regarding access, such as difficulty walking up stairs, please let us know and we will try to meet these needs.

In addition to face-to-face appointments, we may also contact you over the phone or internet, or by email. This will be discussed with you beforehand.

What are our operating hours?

Most services operate between 9:00am – 5:00pm, Monday to Friday, though some OPMH Services may also be available at other times.

If you are already using community OPMH Services and you need urgent advice or support **during office hours**, please call your key contact at the service. If required, arrangements will be made for you to be admitted into hospital.

Those requiring urgent advice or support from our service **outside of our operating hours** should contact the **NSW Mental Health Line on 1800 011 511**.

For **emergency help**, please call 000 or go to the Emergency Department at your nearest hospital.

What will an assessment involve?

We will ask you about the concerns you or others may be having about your mental health. We will aim to understand you as a person and to get to know your background, culture and what makes life meaningful to you. We will discuss what may be worrying you about any aspect of your health.

In our assessment with you, we will ask about your thinking, feelings, mood and behaviour, and any challenges in your daily life. We may also ask you to do activities to check for difficulties in those areas. We will also consider your strengths and abilities and any protective factors for your mental wellbeing.

We will also ensure your physical health is checked and see if there are things that could potentially impact on your safety (such as the risk of having a fall or relating to your living conditions).

If you are an older Aboriginal person or an older person from a culturally and linguistically diverse background, we may also ask you other questions in order to understand any specific needs you may have.

If you have a GP and/or private psychiatrist, we may also ask your permission to speak with them. We will make sure that you and, with your permission, your carer(s) and family are active participants in the assessment.

At the assessment we may also ask your carer about their needs.

The assessment process will help us identify if you are experiencing any symptoms of mental distress. This will help us provide you with the most appropriate care and treatments. It may also involve us referring you to other useful services.

We appreciate that you may already be receiving care and support from other services, and we will discuss this with you during the assessment process.

Helping you to get well

What treatments and care will I have access to?

We will work with you, and with your permission, your carer(s) and family to develop a care plan. This will guide your treatment. The care plan will focus on your recovery goals as well as your mental health needs, and outline the care and treatment that will be provided or arranged through referral to other health professionals. We will work with you towards setting goals for your recovery. See page 16 for more information.

A wellness plan is a plan developed by you, with the help of a mental health professional and/or your carer. It helps to involve you in your own care and to support your recovery. You will identify the things that keep you well including supports and treatments that have been helpful, the things that might make your mental state worse (known as 'triggers'), and how you want others to respond if you become unwell.

Your care plan may include information from your wellness plan.

We will discuss with you which types of treatment and care may be suitable for you. These may include:

- Talking therapies (also known as psychotherapy) – *Cognitive behaviour therapy (CBT)* is one example of a psychotherapy used in the treatment of negative and anxious thoughts. CBT involves working with a therapist to identify unhelpful thoughts and behaviours and learn or relearn healthier skills and habits.
- Providing and/or reviewing medication.
- Providing information about your mental health condition.
- Working with you to develop new skills that can help you to take good care of yourself.
- Electroconvulsive therapy (ECT) – ECT is a safe, pain-free treatment that involves a carefully controlled electric current, and is used to relieve severe depressive and psychotic symptoms. Not everyone needs ECT and if we think it will help you, we will discuss this with you.
- Helping you access other supports and services in the community.
- Providing support and education to carers and families.

We will help you understand the treatment and care options available, explain the choices available and share the decision-making with you.

We will provide some therapies and treatments, and may link you to other services for other treatments. See page 25 for advice on how to access further information on the treatments for mental health conditions or distress, or you can speak with a staff member.

With your permission, we will work with your GP to make sure your physical health concerns are looked after and your goals to improve your physical health are met.

Partners in care: all services working together to meet your needs

We work together with other services to help you get the care you need. We will involve a range of services as necessary to meet your particular needs and to help you meet your recovery goals. These may include:

- GPs
- Aboriginal mental health workers and Aboriginal Medical Services
- multicultural/transcultural health and mental health services
- mental health acute inpatient units for older people
- adult mental health services
- aged care services (Aged Care Assessment Teams and dementia support services)
- home and community care services
- residential aged care facilities (nursing homes)
- aged health/geriatric medical services.

We consider your GP to be a key partner in your care. With your consent, we will speak with your GP about your physical health, any problems you are experiencing and any associated treatments. This information is important as there is a close link between physical health illnesses and mental health problems. Knowing about any physical health problems can help us better assist you with your mental health problems. Your GP will also be involved at various times in your journey with our service, particularly at admission and when you are ready to leave our service.

How long will I receive care, how often will I be seen and by whom?

Everyone is different, so it may be hard to predict how long you will need to be receiving treatment from our service. We will work with you, your carer(s) and family to develop a plan for treatment and to regularly review this plan.

We will talk with you about your needs and how often we should see you. This may be weekly, fortnightly or monthly. How often you see us may change over time, depending on the speed of your recovery.

You will be seen by different members of our team depending on the treatment you need. We may also provide you with a key contact, which is sometimes called a 'care coordinator', to help arrange your care and treatment.

How will my progress be reviewed?

At each appointment, we will ask you about how you are going with your recovery and treatment goals.

Within our team, we will also talk about how you are going with the treatment. This allows us to get advice from our colleagues, and helps us make sure we are providing you with the most suitable care and treatment.

If the care plan needs to change, we will work with you to decide on those changes. You and/or your carer(s) can also ask for the care plan to be reviewed. To help decide what changes should be made to your care plan, we may also ask for your permission to involve your carer(s), family and GP.

What happens when I am ready to leave Community OPMH Services?

When you leave our service, your care will be transferred to another health worker. This may be to hospital staff if you need a period of care in hospital, or may be to your GP. We usually call this process 'transfer of care', which is also known as 'discharge'.

You, and with your permission, your carer(s) and family will be involved in the decision for you to be transferred from our service.

We will ask you to help identify your ongoing care and support needs, and we will contact relevant community services that can help meet these needs before your care is transferred to your GP. Your carers' needs will also be considered.

Prior to your care being transferred to your GP, we will provide information to you about your condition, your medication and dosages and any arrangements made with other services. We will ensure that you know how to reconnect with us should you wish to, and we can provide advice on how to prevent a relapse of your condition.

At the time of your transfer, a summary of your care will be provided to your GP and also to your private psychiatrist if you have one. Your Care Plan will also be included in the transfer documentation.

What guides the way care is provided?

We aim to provide care that is 'focused on your recovery' and is 'person-centred'.

'Recovery' is 'being able to create and live a meaningful and contributing life in a community of choice with or without the presence of mental health issues'. We know that each person is unique and has a different view on what mental health recovery means to them. Your needs and recovery goals will come from your own particular experiences and situation. We will work with you and your family and carer(s) to develop goals of care. Carers are the people you know who help support you at home.

Your goals of care will be based on your relationships, values, beliefs/faith, interests, culture, the environment in which you live, as well as your strengths, abilities and challenges.

We understand that your personal recovery will usually involve the goal of 'continuing to be me' or 'getting back to me'.

Important elements in your personal recovery might include:

- regaining hope and feeling positive about the future
- improving important relationships
- being well connected with your family and community and environment

- learning new ways to cope with physical and mental health issues and
- feeling supported to build on your unique strengths to live your life the way that you want.

Whatever your recovery goals might be, we aim to support you as much as we can in achieving them. We know that your care and recovery goals might change and develop over time and we will adapt to your goals as best we can through your recovery process.

We will discuss your care options with you and support you in making decisions about your care and how best to meet your goals. Our care will take into account your goals of care and recovery, your personal treatment and care needs and circumstances. For example, the pace at which we work will depend on your needs.

We will coordinate your care with your GP and other services of your choice.

We will develop strategies with you to support your ongoing recovery and your mental health and wellbeing in the future.

We understand the importance of good communication. We will communicate clearly and honestly with you and listen and act upon what you and your carer tell us. We aim to provide the right amount and type of information to you and your family, including copies of letters sent to your GP, or discuss with you why this may not happen.

We will provide you with information outlining your rights and responsibilities while you are receiving care from us.

It is important that your beliefs, preferences and treatment goals are upheld in all aspects of care. Contact details for support organisations are provided on page 25.

Support for older people with mental health problems, their carers and family

I'm Aboriginal. Can I get support from Aboriginal health workers?

Aboriginal mental health workers and relevant Aboriginal service providers can be involved in your care if you want. We will discuss this with you and arrange the support you need.

I have difficulties communicating. Can you arrange an interpreter?

If you find it difficult to express yourself in English, you can access a health care interpreter. Health care interpreters can also be used if you prefer to speak a language other than English. You can also access a health care interpreter if you experience sensory deficiencies such as deafness. We will help you to decide if an interpreter is needed, and will arrange access to an interpreter if required.

Accessing a health care interpreter is especially important at critical points in your care such as admission, assessment and when working together with you on your care plan. Your carer(s) and family cannot be used as interpreters.

What else is available to make sure that my cultural needs are understood?

Multicultural health workers or other bilingual health care professionals (who speak English and your language) can help us better understand your needs. They can help us ensure you understand as much as possible about your care.

The Transcultural Mental Health Centre is available to assist you and your carer(s) with your cultural needs (see page 29 for contact details). It provides access to support, information and resources in your own language. We can help you make contact with the Transcultural Mental Health Centre if desired.

What help is there for families and carers?

Carers are encouraged to talk with us about their own needs for support. We understand that the pressure of some care situations can lead to stress, mental exhaustion, depression, frustration and anger. Your carer(s) and family may also need help. We can provide information and support if you or they want it, or if we feel that it will help. We find that this is a helpful thing for most families. Families and carers are also encouraged to seek support from organisations dedicated to their needs, such as Mental Health Carers NSW, Carer Assist, Carers NSW, Alzheimer's Australia and other family and carer support services.

Contact details for carer support organisations are provided on page 25.

Can you help with an application for guardianship?

We will provide you with information on guardianship if it is relevant. An application for guardianship is a request for a guardian to be appointed for someone who is not capable of making lifestyle or personal decisions for themselves. The appointed guardian may be a family member or friend or the NSW Public Guardian, and will have the authority to make these decisions on behalf of the person. If you have any questions on guardianship please talk to us.

Confidentiality, information sharing and providing feedback

What information about me do you share?

We will always discuss the sharing of your information with you first and seek your permission to share with others. Sometimes we might seek the opinions of other staff within our service if it helps us in your care and treatment. Your progress will be discussed by our team during our meetings so we can discuss options available to assist you in your care. We may also talk with other health workers outside of our service, such as your GP or private psychiatrist if you have one.

With your permission, we will share information about you with other services if it is required to help coordinate your care.

NSW Health is committed to safeguarding the privacy of information of people using health services in accordance with the Health Records and Information Privacy Act 2002 and the Mental Health Act 2007. All staff working in our service are bound by these laws, as well as the NSW Health Privacy Manual for Health Information and a strict code of conduct.

We may ask to talk with your family and/or your carer(s) to ensure we have all the important information to provide you with good care. Sometimes you may not be aware of problems you are experiencing (for example, memory problems or some psychotic symptoms) and your family members or carers can help provide this information. They can also help ensure that

your beliefs and preferences are included in your treatment goals. At any time, you can withdraw your consent for OPMH Services to contact particular family members or carers to discuss your progress or care plan. Legally, we can respect your request as long as it does not expose you or your carers to risks or undermine your support by your carers in the community (e.g. if you are going back to live with your carers, they will need to know you are being discharged and if you still need medicine or appointments).

Under the Mental Health Act 2007, your carer(s) may be entitled to receive certain information about your care and discharge. You should tell us if you do not want your carer to receive any information. See <http://www.mha.nswiop.nsw.edu.au/images/factsheets/MHA-FactSheet-Carers.pdf> or <http://www.arafmi.org/wp-content/uploads/2016/01/Designated-Carers-Principal-Care-Providers-Brochure-2016.pdf> for further information about carers and the Mental Health Act, or ask us to provide you with further information.

What did you think about the care and services we have provided?

We actively seek feedback on our service and recognise your right to comment on, or complain about, any aspect of the service you have received. We also like to hear your feedback on how the service has worked for you, or what you have been happy with.

Please let us know what you think. You may be asked to complete a survey called the Your Experience of Service (or 'YES'). This is available in 21 different languages. Carer feedback

is also welcome and carers may be invited to complete a survey.

You can also talk to us, or you may prefer to go through your Local Health District feedback and complaint processes.

Consumer and carer support organisations/networks and further information

Listed below are some of the organisations that provide information and support to older people with mental health problems and their carers and families, along with some of the websites and resources that provide further information on mental health conditions including treatments.

Talk with us if you would like further advice on the support organisations and websites which may be relevant to you.

Aboriginal Health & Medical Research Council of NSW

The AH&MRC represent and support local Aboriginal Community Controlled Health Services that deliver culturally appropriate comprehensive primary health care, including emotional wellbeing care, to their communities.

Website: <http://www.ahmrc.org.au>

Phone: 9212 4777

ACON NSW

Provides information on health issues affecting lesbian, gay, bisexual, transgender and intersex (LGBTI) people and offers a range of services including in the area of mental health and ageing.

Website: <http://www.acon.org.au/>

Alzheimer's Australia NSW

Provides advocacy, support services, education and information relating to dementia.

Website: <https://www.fightdementia.org.au/>

National Dementia Helpline: Phone: 1800 100 500

Email: helpline.nat@alzheimers.org.au

BEING: Mental Health & Wellbeing Consumer Advisory Group

BEING is the independent, state-wide peak organisation for people with a lived experience of mental illness (consumers) and is involved in policy and advocacy at the state level. BEING also provides training to consumers and people working in service providers. BEING does not offer individual advice.

Website: <http://being.org.au>

Phone: 9332 0200

Email: info@being.org.au

Beyondblue

Information and support focused on depression, anxiety and suicide prevention.

Website: <https://www.beyondblue.org.au>

Phone: 1300 224 636 (24 hrs/7 days a week)

Black Dog Institute

Information and support for mood disorders including depression and bipolar disorder.

Website: <http://www.blackdoginstitute.org.au>

Family and carer mental health support programs

Five non-government organisations (NGOs) provide mental health family and carer support services across NSW.

Website: <http://www.health.nsw.gov.au/mentalhealth/Pages/family-mh-program.aspx>

Carers NSW

Provides information, education and support for carers, including carer support groups.

Website: <https://www.carersnsw.org.au/>

Carer Line Phone: 1800 242 636 (9am-5pm Monday to Friday)

Lifeline

Access to 24 hour crisis support and suicide prevention services.

Website: <https://www.lifeline.org.au/Home>

24 hour Crisis Line Phone: 13 11 14

Mental Health Carers New South Wales

Provides support, education and advocacy for the carers, family and friends of those experiencing mental illness across NSW.

Website: <http://www.arafmi.org/>

Information and support line: 1300 554 660

MindhealthConnect

Provides access to trusted, relevant mental health care services, online programs and resources.

Website: <http://www.mindhealthconnect.org.au/>

National Prescribing Service

Information on medicines, including in other languages.

Website: <http://www.nps.org.au/>

NSW Dementia Behaviour Management Advisory Service (DBMAS)

Provide support for the carers of people with dementia who have behavioural and psychological changes.

Website: <http://dbmas.org.au>

Phone: 1800 699 799

Email: dsa@dementia.com.au

NSW Elder Abuse Helpline and Resource Unit

Provides information, support and referrals relating to the abuse of older people in NSW.

Website: <http://www.elderabusehelpline.com.au/>

Phone: 1800 628 221(8.30am-5.00pm, Monday-Friday)

NSW Ministry of Health document: 'Wellbeing in Later Life: Your guide to programs and activities'

A comprehensive guide to activities and programs for the older person, focussed on mental health and wellbeing.

Available at

<http://www.health.nsw.gov.au/mentalhealth/Pages/wellbeing-in-later-life.aspx>

Official Visitors

Official visitors are appointed by the NSW Minister for Health to visit people in mental health inpatient facilities in NSW and are available to assist consumers on community treatment orders. They aim to safeguard standards of treatment and care, and advocate for the rights and dignity of people being treated under the NSW Mental Health Act 2007.

Website: <http://www.ovmh.nsw.gov.au/>

Phone: 1800 208 218 (9am - 5pm, Monday to Friday)

SANE Australia

Information about mental health conditions, treatments, and support. Also hosts online carer and lived experience peer support forums.

Website: <https://www.sane.org/>

Helpline: 1800 18 7263 (weekdays, 9am-5pm)

Senior's Rights Service

A community legal service for older people.

Website: <http://seniorsrightsservice.org.au/>

Transcultural Mental Health Service:

Works with people from culturally and linguistically diverse (CALD) communities, health professionals and partner organisations across NSW to support good mental health.

Provides information (including consumer medication brochures in a range of languages) and support (including the Carer Support Program).

Website: <http://www.dhi.health.nsw.gov.au/tmhc>

Helpline: free call: 1800 648 911 (8:30am-5pm, Monday to Friday)

WayAhead: Mental Health Association of NSW

Provides mental health information – the WayAhead Directory, mental health factsheets and education seminars. Operates free anxiety support groups and self-help anxiety courses throughout NSW. Coordinates mental health promotion activities at the state level such as Mental Health Month NSW.

Website: <http://wayahead.org.au>

Phone: 9339 6000 (general information or enquiries)

Email: info@wayahead.org.au

Mental Health Support Line:

Phone: 1300 794 991 (9am-5pm, Monday to Friday)

Anxiety Disorders Support Line:

Phone: 1300 794 992 (9am-5pm, Monday to Friday)

Improving care in community mental health services

What is being done to maintain and further improve care in community OPMH Services?

We have developed this guide as part of the Specialist Mental Health Services for Older People (SMHSOP) Community Services Model of Care Project. The new model of care will help guide good practice in NSW Health mental health services, and improve care for older people with mental health problems.

Community older peoples' mental health services are working to deliver the new model of care. This will help us to improve our services and the way care is delivered. It will help to ensure that all services across NSW are working in a consistent way. The training and education needs of staff are being considered.

Our services are reviewed on an ongoing basis. We are required to monitor and report on our performance to ensure the delivery of health care is safe and effective. Across NSW, similar services are compared to monitor performance, guide service delivery and development, and to focus on improvement.

If you would like more information of our model of care, please talk to us. We can provide you with a full copy of the **SMHSOP Community Services Model of Care Guideline** or you can access it yourself at:

http://www1.health.nsw.gov.au/pds/ActivePDSDocuments/GL2017_003.pdf

Words in this guide

| | |
|-------------------|---|
| Apathy | This is a lack of interest in life activities and/or interacting with others. It can affect your ability to complete daily tasks. |
| Assessment | Mental health assessment is an evaluation of a person's mental, emotional and social needs. A mental health assessment provides an overall picture of how well you feel emotionally and how well you are able to think, reason and remember. This helps with making a diagnosis based on your symptoms at this point in time. |
| Care Coordination | Care coordination is working in partnership with and linking with other health and community care services to coordinate consumer care. |
| Care coordinator | The 'care coordinator' is responsible for organising and monitoring a consumer's care and treatment, and linking the consumer with a range of services. |
| Care plan | A 'map of action' that outlines the goals, care and treatment that will meet the consumer's needs, as well as supporting referrals to other health professionals as required. |
| Carer | A carer is someone who provides informal care and support to a family member or friend who has a mental illness. |
| Consumer | 'Consumer' is the word many people use to describe someone who is receiving or has received care from a mental health service for their mental health difficulties. The word 'consumer' is used in this guide and by OPMH Services. |

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| Diagnosis | The identification of a mental health condition based on symptoms or problems at a point in time. |
| Guardianship | An application for guardianship is a request for a guardian to be appointed for someone who is not capable of making lifestyle or personal decisions for themselves. The appointed guardian may be a family member or friend or the NSW Public Guardian, and will have the authority to make these lifestyle or personal decisions on behalf of the person. |
| OPMH Services | OPMH Services is the shortened form of 'older peoples' mental health services'. The guide covers older peoples' mental health services provided in the community. |
| Person-centred | Person-centred care takes into account the consumer's needs, preferences and strengths. It involves treating each person as an individual, protecting a person's dignity, and respecting a person's rights and preferences. |
| Protective factors | Protective factors can help to reduce the likelihood of developing a mental health problem, or a relapse of a mental illness. They may be thought of as strengths or assets that help an individual to maintain mental wellbeing and be resilient. |
| Recovery | 'Recovery' has been defined as 'being able to create and live a meaningful and contributing life in a community of choice with or without the presence of mental health issues'. |
| Transfer of care | When a consumer leaves a health service or is transferred to a different institution or level of care. This is often called 'discharge'. |
| Wellness plan | A consumer wellness plan serves as a recovery aid and as a prompt and reminder about what to do to support your recovery. |

