

# Going to a Mental Health Tribunal hearing

## INCLUDES:

- information about compulsory treatment and treatment orders
- information about Mental Health Tribunal hearings
- worksheets to help you represent yourself at a hearing.

## Do you need this booklet in a different format?

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For free information about the law and how we can help you, visit our website [www.legalaid.vic.gov.au](http://www.legalaid.vic.gov.au) or call **1300 792 387**

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Third edition February 2019

**Acknowledgments:** Thank you for the contributions and feedback received from the Victorian Mental Illness Awareness Council, the former Mental Health Review Board and the Mental Health Tribunal when developing earlier editions of this guide.

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**Disclaimer:** The material in this publication is a general guide only. It is not legal advice. If you need to, please get legal advice about your own particular situation.

### Changes to the law

The law changes all the time. To check for changes you can:

- call Victoria Legal Aid's Legal Help phone line on 1300 792 387
- visit Victoria Legal Aid's website at [www.legalaid.vic.gov.au](http://www.legalaid.vic.gov.au)

ISBN 978 1 921949 07 4

Printed on recycled paper consisting of 50% post consumer waste and 50% certified fibre from controlled wood sources.

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### **Victoria Legal Aid**

Victoria Legal Aid is a government-funded agency set up to ensure that people who cannot afford to pay for a private lawyer can get help with their legal problems. We provide free information for all Victorians, family dispute resolution for disadvantaged families, provide lawyers on duty in most courts and tribunals in Victoria, and fund legal representation for people who meet our eligibility criteria. We help Victorian people with legal problems about criminal matters, family breakdown, child protection, family violence, child support, immigration, social security, mental health, discrimination, guardianship and administration, tenancy and debt.

# About this booklet

## What is in this booklet?

This booklet can help you represent yourself at a Mental Health Tribunal hearing about your treatment order.

The first part of this booklet has information about:

- treatment orders and compulsory treatment
- the tribunal
- hearings.

The second part of this booklet has information and worksheets to:

- help you think about what you will say in your hearing and what evidence you will need
- explain some of the questions the tribunal will consider at your hearing
- give you space to write notes that you can take into the hearing.

The third part of this booklet explains what happens on the day of a hearing and what to do if you are not happy with the outcome of the hearing.

## Who is this booklet for?

This booklet is for:

- people who will represent themselves at their own hearing
- family, friends, support workers or advocates helping you at a hearing.

## What is not in this booklet?

This booklet does not have information about:

- hearings about electro-convulsive treatment (ECT)
- having a hearing if you do not want to be moved to a different hospital or clinic.

For more information, contact Victoria Legal Aid or the Mental Health Legal Centre.

Independent Mental Health Advocacy has advocates that can help with contacting these organisations if you are on a compulsory treatment order. See 'Where to get help' on page 26.

## Getting more help

We list the names of organisations that can give you legal advice and other support under 'Where to get help' on page 26.

You may also want to read our brochure *Are you on a treatment order?*

## Legal words

To help you, we have explained some words in 'What do these words mean?' on the next page. These words are also highlighted in bold the first time they appear in each section.

# What do these words mean?

**In every section of this booklet we highlight legal words in bold when they first appear. The definitions for these words are below. We have also included other legal words that you might hear used.**

**advance statement** – a document that sets out your views and preferences about treatment if you become unwell and need compulsory treatment in the future

**advocate** – someone who helps you to stand up for your rights. They can be a lawyer or paralegal but they can also be a friend, family member or support worker

**application for revocation** – if you disagree with compulsory treatment you may apply to the tribunal and ask them to revoke (cancel) the order

**assessment order** – an order that lets a doctor or a mental health practitioner assess whether you need compulsory treatment for a mental illness

**capacity** – the law says you have capacity to give informed consent to treatment if you:

- understand the information given about that decision
- remember that information
- can use and weigh up that information
- can communicate the decision you make

**clinical file** – notes that your treating team make about you and your treatment. The notes will be on things the treating team have seen, things you have told the treating team and things other people have told the treating team about you

**community patient** – a person getting compulsory treatment in the community

**compulsory treatment** – treatment you can be given for a mental illness under a treatment order, even if you do not agree to it

**evidence** – the information that the tribunal uses to make its decision. Evidence can be given verbally at the hearing or in documents. See ‘Get evidence’ on page 8 for more information

**hearing** – the tribunal holds a hearing to talk to you and your treating team to decide whether the four treatment criteria apply to you

**informed consent** – the law says you have given informed consent to treatment if you:

- have capacity to give informed consent (agreement) to the treatment proposed
- have been given adequate information to make a decision
- have been given a reasonable opportunity (time) to make the decision
- are able to consent freely, without pressure by anyone, and
- you have not withdrawn your consent or suggested you intend to withdraw consent.

An authorised psychiatrist will decide if you are able to consent or not

**inpatient** – a person who is detained in hospital to get compulsory treatment

**mental health practitioner** – a social worker or registered psychologist, nurse or occupational therapist who works at a public mental health service. This can be either at a hospital or clinic

**Mental Health Tribunal** – the tribunal that decides whether the four treatment criteria apply to you, and therefore whether you need compulsory treatment

**nominated person** – someone you have formally asked to support you and receive information about your treatment

**psychiatrist** – the law refers to an ‘authorised psychiatrist’ who is a senior psychiatrist with decision-making authority. In this guide we refer to authorised psychiatrists as a ‘psychiatrist’

**psychotherapy** – a group of therapies provided by a psychiatrist, psychologist or counsellor

**Report on Compulsory Treatment** – a report your treating psychiatrist writes for the tribunal explaining why the psychiatrist thinks you need a treatment order for compulsory treatment

**revoke** – cancel

**second psychiatric opinion** – you have the right to get a second psychiatric opinion if you do not agree with your treating psychiatrist’s diagnosis. A second opinion can come from another psychiatrist at your treating hospital or clinic, or from an external (independent) psychiatrist

**treatment criteria** – the four legal requirements that must all be met before you can be put on a treatment order for compulsory treatment

**treatment criterion** – one of the requirements that must be met before you can be put on a treatment order for compulsory treatment

**treatment order** – a document that lets a hospital or clinic give you compulsory treatment for a mental illness, even if you do not agree to it. There are different types of treatment orders. There are temporary treatment orders (both inpatient and community) and treatment orders (both inpatient and community). The law talks about temporary treatment orders and treatment orders differently. This booklet uses the term ‘treatment order’ to refer to all these orders, where appropriate

**treating team** – your psychiatrist and the other healthcare professionals who work together to provide you with treatment and care

### What is compulsory treatment?

**Compulsory treatment** is treatment that you will get for a mental illness if the four **treatment criteria** apply to you. You can only be given compulsory treatment if you do not have **capacity** to give **informed consent** to treatment or you are refusing treatment, and there are no less restrictive means for you to be treated.

### What are the four treatment criteria?

The four treatment criteria are:

1. You have a mental illness.

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2. Because of your mental illness you need immediate treatment to prevent serious deterioration in your mental or physical health or to prevent serious harm to you or another person.

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3. Immediate treatment will be given to you if you are on an order.

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4. There are no less restrictive means, reasonably available, for you to get the treatment that you need.

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### What does the Mental Health Tribunal do?

The tribunal holds **hearings** to decide if all four treatment criteria apply to you.

If they decide that the four treatment criteria do apply, the tribunal will make a **treatment order**.

They will also decide:

- whether you should be treated as a **community patient** or as an **inpatient** in hospital
- the length of your order.

If the tribunal decides that at least one of the four treatment criteria does not apply to you, they must **revoke** your treatment order.

The tribunal can also make decisions about electro-convulsive treatment (ECT) and can hold hearings if you do not want to be moved to a different hospital or clinic. This booklet does not have information on these sorts of hearings.

### Who sits on the tribunal?

There will usually be three tribunal members, including a lawyer, a psychiatrist or other doctor, and a community member. The psychiatrist or doctor cannot be anyone treating you or working for your hospital or clinic.

### How long can the tribunal make a treatment order go for?

The tribunal will decide the maximum amount of time the treatment order will last:

- community treatment order – any time up to 12 months
- inpatient treatment order – any time up to 6 months.

However, if you are under 18 years, either order cannot be longer than 3 months.

If the tribunal makes a 5-month inpatient treatment order, it does not necessarily mean you need to stay in hospital for the whole 5 months. When you are able to be treated in the community, the **psychiatrist** must discharge you from hospital and vary your order to a community treatment order for the time left on the order.

If one or more of the treatment criteria stop applying to you, your psychiatrist must revoke your order. Compulsory treatment can stop, even if you have time left on your order.

If the psychiatrist has not varied or revoked your order when they should have, seek advice and consider making an application to the tribunal.

If your treatment order is about to run out but your psychiatrist thinks you need more compulsory treatment, your psychiatrist may apply to the tribunal for another treatment order.

### When does the tribunal hold hearings?

The tribunal will hold hearings when:

- a psychiatrist has made a temporary treatment order over you or changed your community treatment order to an inpatient treatment order. The tribunal must hold a hearing within 28 days of either of these things happening, and before your order ends
- your psychiatrist has applied to put you on another treatment order
- you are on a treatment order and make an **application for revocation** to the tribunal.

### How does the tribunal make its decisions?

At the hearing the tribunal hears and reads **evidence** from you and your **treating team** about whether the four treatment criteria apply to you. The tribunal also hears and reads general background information about you.

For more information, [see](#) 'Get evidence' on page 8.

### What can't the tribunal decide?

The tribunal cannot:

- decide that the doctor gave you the wrong diagnosis
- change your medication or treatment
- give you compensation money or punish the doctor if you are unhappy about the way you have been treated
- give you leave from the hospital.

You can still talk about these issues in your hearing. They may be relevant to whether the four treatment criteria apply to you. Although the tribunal cannot have your medication changed, they can help you talk about it with your treating team.

**START HERE** I have a mental illness

**NO**

**YES**

If I do not have immediate treatment for my mental illness, my mental or physical health will seriously deteriorate OR I or someone else will be seriously harmed.

**NO**

**YES**

I will get the treatment I need on a treatment order.

**NO**

**YES**

I will take the treatment voluntarily without a treatment order.

**YES**

**NO**

Even if the tribunal thinks I need an order, I do not agree with the type or length of order my treating team wants.

**OR**

## 1. Decide what criteria to focus on

You can use the diagram below to see what your situation is and what your case might be. It can help you work out which worksheets and **treatment criteria** to focus on.

You can either:

- respond to the statements in the green boxes and follow the arrows to the pink boxes that match your responses
- or**
- go straight to reading the pink 'My case' boxes to find the one that best describes your situation.

### MY CASE

I do not have a mental illness. Treatment criterion 1 is **not** met and so I do not need to be on a treatment order.

FOCUS ON  
WORKSHEET 1

### MY CASE

I do not need mental health treatment to prevent serious deterioration or harm to others. Treatment criterion 2 is **not** met and so I do not need to be on a treatment order.

FOCUS ON  
WORKSHEET 2

### MY CASE

Although I need treatment for my mental illness, the treatment I need will not be provided to me under the order. Treatment criterion 3 is **not** met and so I do not need to be on a treatment order.

FOCUS ON  
WORKSHEET 3

### MY CASE

I will take the treatment voluntarily by choice. I do not need an order forcing me to take it. Taking the treatment voluntarily is less restrictive than being on a treatment order. Treatment criterion 4 is **not** met and so I do not need to be on a treatment order.

(You might say this either because you agree you have an illness and need treatment, or because you will go along with the treatment the doctor thinks you need simply to avoid having an order.)

FOCUS ON  
WORKSHEET 4

### MY CASE

I might need to stay in hospital as a compulsory inpatient but I do not need to be here as long as my treating psychiatrist says I do.

FOCUS ON  
WORKSHEET 5

### MY CASE

I do not need to be in hospital to get the treatment. If I have to be on an order, I would prefer it to be a community treatment order. The tribunal should make a community treatment order rather than an inpatient treatment order.

(You might also disagree with your treatment team about how long the order should be.)

FOCUS ON  
WORKSHEET 5

## 2. Fill in the worksheets

There is one worksheet per criterion. There is also a fifth worksheet which you can use if you do not agree with the type or length of order your **treating team** wants. The worksheets guide you through:

- what that **treatment criterion** means
- questions the **tribunal** may ask you about that criterion.

The worksheets have space for you to:

- write notes about your answers to the questions the tribunal may ask about that criterion
- list your **evidence** that backs up your answers
- write notes about the treating team's evidence that relates to that criterion.

Focus on filling in the worksheets that are about the criteria that relate to your situation and case. These are the criteria you will need to show do not apply to you.

If you have time, you can read through all the worksheets to get an idea of what else the tribunal will be looking at in the **hearing**.

## 3. Get evidence

The tribunal makes its decision based on evidence.

In the worksheets we suggest you list evidence that backs up your answers. You should bring as much evidence as you can to the hearing to back up what you say. You can give the evidence to the tribunal to read, listen to or look at.

The treating team will also bring evidence to the hearing for the tribunal to consider.

## Types of evidence

Evidence can include:

- verbal evidence:
  - what you say at the hearing to the tribunal
  - what the treating team says at the hearing to the tribunal
  - any person ('witnesses') who can provide information at the hearing to the tribunal about your situation
- documentary evidence (written documents and reports):
  - the **Report on Compulsory Treatment**
  - the **clinical file**
  - any **advance statement** you may have written
  - any written **second psychiatric opinions** about you
  - documents with the views of a family member, carer or **nominated person**
  - any other document that will help you explain what you want to say. For example, a written version of your story or a letter from your GP.

The tribunal will send you a form called *Your report to the Mental Health Tribunal – for patients and their carers/nominated persons* with the notice of hearing. You can fill this in before the hearing.



### Organising your evidence

If you want someone like a family member, carer or nominated person to speak at the hearing, make sure you:

- give that person enough notice so they can get ready to come. For example, the person may need to arrange to take time off work
- give the person the date, time and address of the hearing
- tell the person the sort of things you want them to talk about at the hearing.

If you have documentary evidence that backs up what you say, make sure you give yourself enough time to get the evidence. For example, if you are getting a written second psychiatric opinion, you will need time to have an appointment with the other psychiatrist. That psychiatrist will also need enough time to write up the second opinion.

### The treating team's evidence

The treating team will show the tribunal:

- the Report on Compulsory Treatment
- the clinical file.

Your treating team write the Report on Compulsory Treatment. It has their opinion and information about:

- why the treating team think all four treatment criteria apply
- what happened shortly before you were admitted to hospital or put on the **treatment order**
- what mental illness the doctor thinks you have
- the treatment that you are being given
- the treatment that the doctor plans to give you in the future
- why the doctor thinks you need that treatment and for how long
- what the doctor thinks would happen if you did not get that treatment
- why the doctor thinks you need to be on a treatment order to get that treatment.

The clinical file has:

- all the notes that the treating team made about you and your treatment. This may be things they have seen, things you have told them or things other people have told them
- documents such as risk assessments and reports
- other documents to do with your **compulsory treatment.**

The treating team will also talk to the tribunal (give verbal evidence).

### **Getting copies of the treating team's evidence**

You have the right to read the Report on Compulsory Treatment and the clinical file at least 48 hours before the hearing. The treating team must give you a copy of the Report on Compulsory Treatment and explain it to you. However, your treating team may ask the tribunal for permission to refuse to give you certain documents if doing so may result in serious harm to you or another person.

Try not to get too upset about the Report on Compulsory Treatment or the clinical file. Remember, it is the treating team's version of events. You will have a chance to tell the tribunal about what you think happened and why.

If the treating team does not give you their evidence, or if you get the evidence late, tell the tribunal. If this has made it harder for you to prepare what you want to say, you may want to ask the tribunal to adjourn (delay) the hearing so you have more time to prepare.

### **Commenting on the treating team's evidence**

The tribunal will let you speak about the treating team's evidence. It may help if you spend some time before the hearing reading their evidence and thinking about what you will say.

In the worksheets, we have left space for you to make notes about the treating team's evidence.

Make sure you understand what the documents say about:

- why the treating team think you ended up in hospital or put you on the treatment order
- what treatment the treating team are giving you
- what treatment you have had before
- observations the treating team have made about your behaviour
- what the treating team think would happen if you did not have the treatment
- what the treating team say your mental health history is (this may include when they say you were first diagnosed, when doctors or psychiatrists put you on treatment orders before or when you have been in hospital for mental health issues before).



#### 4. Check in with the Victoria Legal Aid duty lawyer

Victoria Legal Aid duty lawyers visit all hospitals and some community mental health clinics.

The lawyers may not be able to come with you to the hearing but they can help you get ready by:

- going through this booklet with you and explaining what happens at the hearing
- going through your worksheets, once you have filled them in, and giving you suggestions or advice about what you have written
- looking through your evidence and giving suggestions or advice about it
- looking through the treating team's evidence and giving advice about it.

Check with the hospital or community mental health clinic to see when the lawyer is visiting next. You can ask for an appointment. You can also get legal advice over the phone by contacting Victoria Legal Aid's Legal Help line. See 'Where to get help' on page 26.





# Worksheet 1

## treatment criterion 1

### You have a mental illness.

#### Does this criterion apply to you?

The tribunal will consider that this criterion applies to you if the evidence shows that you have a mental illness.

The law says that a mental illness is a medical condition that involves a significant disturbance of thought, mood, perception or memory. Some examples are depression, schizophrenia, schizoaffective disorder and bipolar affective disorder.

The tribunal will read the Report on Compulsory Treatment and the clinical file. It is not enough evidence for the tribunal to hear that the doctor thinks you 'appear' to have a mental illness or that you have had a mental illness in the past.

#### What might the tribunal members ask you?

The tribunal may ask you:

- Are you experiencing any significant disturbance of thought, mood, perception or memory?

- When did you last experience this?
- Has a doctor diagnosed you with a mental illness?
- What do you think about that diagnosis?
- If you disagree with the diagnosis, why do you disagree?
- Have you been diagnosed with this mental illness or another mental illness before?

If you do not think you have a mental illness, the tribunal may also ask you:

- Do you have evidence (for example, a second opinion) from another psychiatrist or doctor who agrees with you that you do not have a mental illness?
- What is your explanation for the things which the doctor on the treating team says are symptoms or evidence of mental illness?
- Why does your treating team think you need treatment? What happened?
- Why are you getting treatment or having treatment proposed for you?

**Your answers:** *(Write your thoughts here.)*

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## Worksheet 2 treatment criterion 2

**Because of your mental illness you need immediate treatment to prevent serious deterioration in your mental or physical health or to prevent serious harm to you or another person.**

### Does this criterion apply to you?

This is one of the more complicated criteria. The tribunal will consider that this criterion applies to you if the evidence shows that:

- your mental or physical health will **seriously deteriorate** if you do not get immediate treatment
- or**
- you or another person might be **seriously harmed** if you do not get immediate treatment.

And the evidence must show that:

- these things would be caused by your mental illness
- and**
- the proposed treatment will help prevent these things
- and**
- the proposed treatment is done with professional care to make your illness go away or lessen symptoms and ill effects of mental illness.

Treatment can include medication and **psychotherapy**.

The tribunal must also take into account your views about treatment in your advance statement, if you have one.

### What might the tribunal members ask you?

The tribunal members may ask you questions about treatment, such as:

- What treatment are you getting?
- What do you think about that treatment? Is it helping you? What are the side effects?

- Will the treatment fix your mental illness or lessen its symptoms or ill effects?
- Is there another type of treatment that would help or that you would prefer?
- Is there another way (other than treatment) for you to look after your mental or physical health?

The tribunal members may ask you questions about what might happen if you do not get immediate treatment. For example:

- What do you think will happen if you do not have immediate treatment?
- Would your mental or physical health get worse? How serious could this get?
- Would you or another person be harmed? How serious might this harm be?
- Why does your treating team say that your mental or physical health would get seriously worse, or that you or another person would be seriously harmed, if you did not have the treatment?
- What do you say about whether these things could happen?
- Is your mental illness causing your mental or physical health to get worse? Is it causing the chance of harm to you or another person? Or is there something else going on that might be causing these things?
- Is there another way of stopping these things from happening that does not involve treatment?
- What has happened in the past when you were not treated?









## Worksheet 4 treatment criterion 4

**There are no less restrictive means, reasonably available, for you to get the treatment that you need.**

### Does this criterion apply to you?

The tribunal wants to know whether you would take treatment without a treatment order if it were completely up to you. If you would keep getting treatment without a treatment order, this criterion is not met.

You could think about appointing a nominated person or creating an advance statement. The tribunal will consider the views of the nominated person and your advance statement when making a decision about your treatment.

### What might the tribunal members ask you?

The tribunal members may ask you questions about treatment, your supports in the community and what you would do if you became unwell again.

### Questions about treatment

- If you were not on a treatment order and free to make your own decisions, would you:
  - stay at the hospital as a voluntary patient? Why?
  - continue the treatment? Why?
- Do you think the treatment is helping you? In what way? What would happen to you if you forgot or stopped taking your treatment and medications?
- Have you been treated in a community mental health clinic before? How did that go?
- Do you have a relationship with the local clinic already? Would you be honest with the clinic about how things are going?

- Did you stick with your treatment and go to appointments when you went to the clinic in the past? If not, why not? What would be different this time?
- How would you remember your appointments? How would you get to the clinic?

### Questions about your supports in the community

- If you left the hospital, do you have somewhere to live? What sort of place is this? Is there someone there who can help? For example, help you take your medication.
- What supports and help do you have in the community? Who has regular contact with you and makes sure you stay well and continue your treatment?

### Questions about becoming unwell again

- If you have stopped taking treatment in the past and become unwell, what would be different this time? Do you understand enough about your mental illness to make clear decisions about your treatment now?
- Would you be able to recognise if you are becoming unwell in the future? What signs would you notice?
- If you became unwell again, what would you do?
- Have you asked for help before when you were becoming unwell? Is there someone you see regularly who would notice any changes in your mental state and call your doctor or the Crisis Assessment and Treatment (CAT) team if they were worried about you?
- Would you work with your local doctor, a private psychiatrist or the community mental health service? Have you worked with them before?

Your answers: *(Write your thoughts here.)*

**About the treatment**

A series of horizontal dotted lines for writing.



**Your evidence to back up your answers:** *(List your evidence here.)*

Evidence to back up your answers to questions about the treatment

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Evidence to back up your answers to questions about supports in the community

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Evidence to back up your answers to questions about getting unwell again

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**Your notes about the treating team's evidence:**

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## Worksheet 5

# type and length of treatment order

### How will the tribunal decide the type of treatment order to put you on?

If the tribunal finds that the four treatment criteria apply to you, the tribunal will then need to decide what type of treatment order to make. This will decide where you get treatment. The types of orders are:

- **inpatient treatment order** – you will get treatment in hospital
- **community treatment order** – you will get treatment in the community.

The tribunal can only make an inpatient treatment order if they think you cannot get compulsory treatment in the community. The tribunal will want to know whether you can get the treatment without being forced to stay in hospital and without hospital staff closely supervising you.

### How will the tribunal decide the length of your treatment order?

There are maximum lengths that the tribunal can make a treatment order last for:

- community treatment order – any time up to 12 months
- inpatient treatment order – any time up to 6 months.

If you are under 18 years, either order cannot be longer than 3 months.

The tribunal cannot make an order last for any longer than these maximum lengths. To decide the exact length of your order, the tribunal will think about:

- how long you would like it to go for and why you feel this way
- the point in time at which the evidence shows that the four treatment criteria would no longer apply to you.

### What questions might the tribunal members ask you?

The tribunal members may ask you questions about your supports in the community:

- Is your medication still being trialled or adjusted in the hospital?
- Is your mental state still changing? Do the hospital staff need to closely supervise you at the moment?
- Are there any benefits to you staying in the hospital? Or are the benefits of you being home greater than any benefit for you staying in the hospital?
- Have you been treated in a community mental health clinic before? How did that go?
- Do you have a relationship with the local clinic already? Would you be honest with the clinic about how things are going?
- Did you stick with your treatment and go to appointments when you went to the clinic before? If not, why not? What would be different this time?
- How would you remember your appointments? How would you get to the clinic?
- Do you have somewhere to live? What sort of place is this? Is there someone there who can help? For example, help you take your medication.
- Is there someone you see regularly who would notice any changes in your mental state and call your doctor or the Crisis Assessment and Treatment (CAT) team if they were worried about you?
- Are you happy to have extra support such as the CAT team visit you when you get out of hospital?





### Where do hearings happen?

Tribunal **hearings** generally happen where you get your treatment. The tribunal comes to your hospital or clinic and has the hearing in a meeting room there. At some hospitals and clinics, the tribunal members may not be there in person but be there by video link.



### How long are hearings?

Hearings go for about an hour.

You may have to wait a while for your hearing to start. A number of hearings will happen on the same day. The hospital or clinic staff will let you know when it is time for your hearing.



### Who is at the hearing?

- You. You can also bring a lawyer or **advocate** to your hearing.
- Tribunal 'members'. These are people who run the hearing and make the decisions. See 'Who sits on the tribunal?' on page 4.
- **The treating team**. The doctor who is treating you will usually be there. Your nurse or case worker may also be there.
- Family and carers. You can choose to bring other people. You can ask a friend or family member to come to give **evidence** for you. If you do not want family members or other people to be there, tell the tribunal at the start of the hearing.

- **Nominated person**. You can nominate (ask) someone you trust to support you and receive information. The tribunal will listen to the nominated person's views. However, if you decide that you do not want the nominated person there, let the tribunal know.
- Interpreters. If you do not speak English very well, you can have an interpreter at the hearing. The tribunal can organise and pay for this.



### Is the hearing private?

Yes. Members of the public cannot sit in and listen. The tribunal members and everyone at the hearing should not tell anyone else what happened at your hearing.



### What should I bring to the hearing?

Bring your:

- notes for your verbal evidence or the people giving the verbal evidence
- your documentary evidence
- any of the worksheets that you filled in.

### What if I am not happy with the tribunal's decision?

It is a good idea to speak to a lawyer before doing any of these things below.

#### Ask for a written Statement of Reasons

You can write to the tribunal and ask for a written 'Statement of Reasons'. This document will explain why the tribunal made their decision. You must ask the tribunal for their written reasons within four weeks of the hearing. They should give you their reasons within four weeks of your request. Before you ask for written reasons, you should be aware that a copy will probably go on your **clinical file**.

#### Ask for another hearing

You can make an **application for revocation** and return to the tribunal for another hearing. You can do this as many times as you need to. To do this, you fill in the form *Application to Mental Health Tribunal*, which you can get from your community mental health service or the tribunal.

#### Apply to VCAT

You can apply to the Victorian Civil and Administrative Tribunal (VCAT) and have a new hearing there. You must apply to VCAT within four weeks of your tribunal hearing or of getting the tribunal's reasons.

#### Get a second opinion

You have the right to get a second opinion from another psychiatrist. Your treating **psychiatrist** must consider the second opinion but does not have to change your treatment. You can ask for reasons why they did not change your treatment.

You can ask the Chief Psychiatrist to review your treatment if your psychiatrist does not follow the recommendations of the second opinion.

#### Your say about treatment

Even if you are on a treatment order, you still have a say about your treatment.

If you believe that your treatment team is not talking to you about treatment decisions, or not properly considering your views and preferences, you can get help from the Independent Mental Health Advocacy service. You can also make a complaint to the Mental Health Complaints Commissioner. For contact details, **see** 'Where to get help' on page 26.



# Where to get help

## Victoria Legal Aid

### Legal Help

For free information about the law and how we can help you, visit our website [www.legalaid.vic.gov.au](http://www.legalaid.vic.gov.au) or call **1300 792 387**

Monday to Friday, excluding public holidays

### Do you need help calling us?



#### Translating and Interpreting Service

**Tel:** 131 450



#### National Relay Service

**TTY users:** Call 133 677

**Speak and Listen users:**

Call 1300 555 727

**Internet relay users:**

See [www.relayservice.gov.au](http://www.relayservice.gov.au)

## Local offices

We have offices all over Victoria. Our offices are open Monday to Friday, 8.45 am to 5.15 pm.

See the back cover for office locations.

All offices are accessible to people with a disability.

## Other contacts

### Independent Mental Health Advocacy

Provide support to people who are receiving compulsory mental health treatment to make decisions and have as much say as possible about their assessment, treatment and recovery.

**Tel:** 1300 947 820 Monday to Friday (except public holidays), 9.30 am to 4.30 pm  
For a recording of your rights under the *Mental Health Act 2014*, call 1800 959 353.

**Email:** [contact@imha.vic.gov.au](mailto:contact@imha.vic.gov.au)

**Website:** [www.imha.vic.gov.au](http://www.imha.vic.gov.au)

## Mental Health Legal Centre

**Tel:** (03) 9629 4422 or 1800 555 887 (country callers)

**Email:** [mhlc@mhlc.org.au](mailto:mhlc@mhlc.org.au)

**Website:** [www.mhlc.org.au](http://www.mhlc.org.au)

## Mental Health Complaints Commissioner

The Commissioner deals with complaints about Victorian public mental health services.

**Tel:** 1800 246 054 (free call from landlines) or (03) 9032 3328

**Website:** [www.mhcc.vic.gov.au](http://www.mhcc.vic.gov.au)

## Mental Health Tribunal

**Tel:** 1800 242 703 (toll-free) or (03) 9032 3200

**Email:** [mht@mht.vic.gov.au](mailto:mht@mht.vic.gov.au)

**Website:** [www.mht.vic.gov.au](http://www.mht.vic.gov.au)

## Second Psychiatric Opinion Service

An independent service for second psychiatric opinions.

**Tel:** 1300 503 426

**Website:** [www.secondopinion.org.au](http://www.secondopinion.org.au)

## Victorian Civil and Administrative Tribunal

**Tel:** 1300 01 8228

**Website:** [www.vcat.vic.gov.au](http://www.vcat.vic.gov.au)

## Victorian Mental Illness Awareness Council

For advocacy and support.

**Tel:** (03) 9380 3900

**Website:** [www.vmiac.org.au](http://www.vmiac.org.au)

## Chief Psychiatrist

**Tel:** 1300 767 299

**Website:** [www.health.vic.gov.au](http://www.health.vic.gov.au) and search for 'Chief Psychiatrist'

## Useful Victoria Legal Aid resources

### To order publications

We have free booklets about the law in English and other languages. Visit [www.legalaid.vic.gov.au](http://www.legalaid.vic.gov.au) to order or download booklets. Call (03) 9269 0234 and ask for Publications to find out more.

### Our public law library

Open Monday to Friday, 9.00 am to 5.00 pm  
570 Bourke Street, Melbourne



Victoria Legal Aid help card  
Available in English and 25 languages



*Are you on a treatment order?*  
Available in English, Arabic, traditional Chinese, simplified Chinese, Dari, Greek, Italian, Macedonian, Persian, Spanish, Turkish and Vietnamese



Independent Mental Health Advocacy (IMHA) *Information for consumers: know your rights*



Watch our community legal education videos.

# Going to a Mental Health Tribunal hearing

## Victoria Legal Aid

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Monday to Friday, excluding public holidays

For business queries, call (03) 9269 0234

## Offices

Melbourne

### Suburban offices

Broadmeadows

Dandenong

Frankston

Ringwood

Sunshine

### Regional offices

Bairnsdale

Ballarat

Bendigo

Geelong

Horsham

Mildura

Morwell

Shepparton

Warrnambool



## Publication orders

To download or order our publications in English or other languages go to [www.legalaid.vic.gov.au](http://www.legalaid.vic.gov.au)  
If you need help ordering online please call (03) 9269 0234 and ask for Publications or email [cle@vla.vic.gov.au](mailto:cle@vla.vic.gov.au)