

Mental Health Legal Centre

Annual Report 2018-2019



Contents

Our Visions and Values	4
Board Update	5
Manager's Update	6
The MHLC Team	9
MHLC Supporters	10
Project Updates and Case studies	
Royal Commission into Victoria's Mental Health System	11
Day Service	13
MHT hearings	14
Night Service	15
Advance Statements	16
Bolton Clarke Homeless Persons Project	17
Community Legal Education	20
Inside Access—DPFC	22
Inside Access—Ravenhall	26
Multi Disciplinary Practice	29

Our Visions and Values

The Mental Health Legal Centre (MHLC) is a service designed to help provide legal and social supports to people who have a mental illness. We provide this support through our various clinical and community centred programs, providing outreach services to people across the community.

OUR VISION

FOR THE COMMUNITY

We are working towards a socially just and inclusive community that understands and supports people with mental health issues, respects their rights and by doing so improves overall quality of life.

FOR MHLC

We deliver justice for people with mental health issues.

OUR PURPOSE

We provide access to justice for Victorians experiencing mental health issues through our multi-disciplinary legal service, research and advocacy work.

We provide expert legal advice, representation and other services to Victorians experiencing mental health issues.

We educate and inform staff, students, volunteers, partners and the broader community about mental health issues.

We provide unique professional development opportunities for students, volunteers, organisational partners and staff.

We develop and share our innovative practice knowledge around delivery of legal and social supports for people experiencing mental health issues.

We advocate for reform to improve social justice and quality of life for people with mental health issues.

OUR VALUES

PERSON-CENTRED

Our clients will be listened to and treated with dignity, compassion, empathy and respect.

COLLABORATION

We encourage and develop sustainable partnerships aimed at meeting the needs of our clients.

SERVICE EXCELLENCE

We provide confidential high quality holistic and responsive services. We develop and share best practice.

EMPOWERMENT AND ADVOCACY

We work fearlessly on behalf of and alongside our clients to protect their human rights and increase community awareness about the challenges they face.

ACCOUNTABILITY/INTEGRITY

We monitor and evaluate the quality of impact of our services. We act ethically and responsibly.

IMPACT

Our staff, volunteers and Board are committed to making a difference and creating positive change. We work as a team, respect each other's background, skills and contribution, support and live our shared values, communicate openly and celebrate milestones and achievements.

Board Update

When we look back on 2018 and 2019, people will remember mental health finally getting the attention it deserves with the commencement of the Royal Commission into Mental Health. That said, it has been an incredibly busy time for MHLC trying to manage their current work load and spend the time required to present and highlight to the Royal Commission what the current state of mental health services are and wanting to make recommendations to assist with future reform. With minimal resourcing MHLC has made two submissions to the Royal Commission, one on forensic mental health and prisons and the other on the mental health system more broadly. We have also had a huge increase in calls - and an increase in the complexity of calls - as well as assisting our clients to make their own submissions to the royal commission.

At the time of writing this - and it is an excellent way to finish off the year - I am pleased to share that in early October Minister Foley announced funding to the MHLC and a number of other community organisations for the purposes of responding to the Royal Commission. This is incredibly important as we need to be able to have a voice to speak for those who cannot, including people who are incarcerated, homeless or in treatment. We were also very happy to receive funding from the Department of Justice and Community Safety and Corrections Victoria which, for the first year ever, funded our delivery of services to the Inside Access Program we run at Dame Phyllis Frost.

Gratitude

The MHLC could not operate without funding and we would like to acknowledge the current and former Ministers for Corrections, The Hon. Gayle Tierney and The Hon. Martin Pakula, Minister for Mental Health, The Hon. Martin Foley and the current and former Attorney-Generals The Hon. Jill Hennessy and The Hon. Ben Carroll. Other funding comes from the Legal Services Board, GEO, Igniting Change, Coopers Investors, Phyllis Connor Memorial Trust, Lord Mayors Charitable Foundation, The Myer Foundation, WCF Thomas and the Attorney General's Department.

Acknowledgement must be given to RMIT for our accommodation and we look forward to our move which will see us co-located with Youth Law and Law and Advocacy Centre for Women, hopefully in the next month.

Thank-you also to the Director of the Centre for Innovative

Justice, Rob Hulls, and the CIJ seconded staff, Kate Ottrey and Bernice Beaucaine.

I would like to give a big thank-you to our Chair, Stan Winford who has recently taken a leave of absence; his work on the Board has been unwavering. Earlier this year we were sad to say good bye to our treasurer, Tony Goad, who navigated the MHLC through difficult times. It has been wonderful to welcome our new treasurer Geoff Southwell as well as Theresa Swanborough to the Board who have joined with our other members Sophie Brown and Vicky Keller and I thank them for their time, energy, ideas and work. As we have had some fresh people join the board, we have found it helpful to include staff perspectives in the monthly board meetings and it has been a helpful way to connect with staff and really understand our Centre.

Finally, a big thank you to all of the wonderful staff and volunteers of the MHLC who work so tirelessly and continue to deliver outstanding services.

Acknowledgement must go to **Charlotte Jones** for her management of the Centre and her outstanding efforts securing funding and to our Principal Solicitor **Ann Jorgensen** for her significant contribution as well as coordinating the submissions to the Royal Commission; their passion for their work is inspiring and motivating.

I have been on the board since December 2012 and my term has come to an end. What a journey it has been, from struggling to survive to a multi-disciplinary organisation that has been able to diversify our service delivery. I am incredibly proud of how far the MHLC has come but by no means is this the end, bigger and better things are just around the corner and it remains an exciting time as the future of mental health in Victoria will be reformed and will ultimately shape the framework for mental health across Australia. I leave happy knowing that the future for the MHLC is bright.

Sarah Manly
Acting Chairperson

Manager's Update

MHLC spent the 2018/2019 year focused on service delivery. To achieve the enormous volume of work detailed in this Annual Report, the dedicated MHLC team has expanded and our army of volunteers, students, pro bonos and supporters have worked tirelessly. Our efforts culminated in two submissions based on evidence and client outcomes which were sent to the Royal Commission into Victoria's Mental Health System. We also made a submission to the Productivity Commission's Inquiry into Mental Health.

Staffing Updates

This year James Kyrios, who had been a volunteer law student and then our administrator and PLT student, resigned to take up his first legal role. After 5 years of service to the clients of the MHLC, we wish James all the very best. We know that all the staff, volunteers and students are a little lost without him so we are delighted that he has now returned to the night service as a volunteer. This type of dedication and commitment to the MHLC reflects the culture which the Board have been so keen to cultivate to maintain and support effective service delivery.

We also said goodbye to Jill Menius who was a dedicated member of our Inside Access team. We are delighted to announce that Jill and her partner Gareth are now the proud parents of baby Jack. Huge congratulations to all. Cristiana Tomasino has very ably stepped into Jill's role.

This year saw our CIJ secondees Anna and Kat redeployed within CIJ and welcomed Kate Ottrey and Bernice Beaucaine in their place. Kate and Bernice have both been busy refining and developing the services which we offer to the women in DPFC and

have quickly established themselves within the team. We were also forced to say goodbye to Peter Cavanagh who had led the night service for several years after we were unable to secure additional funding.

We have also welcomed Rory Slatter and Lynne Hamilton to our admin team. Both have quickly embedded themselves seamlessly with Sarah, Pam and Cristiana.

Service Delivery

All aspects of MHLC work have expanded and the demand for services has grown. We have focused our attention on issues affecting older members of our community continuing our work from last year. The Inside Access project has seen unprecedented demand and the funding provided by the Department of Corrections and Community Safety was both timely and extremely welcome. We have also received enormous support through the Legal Services Board and Commissioner who funded an Advance Statements project alongside our Partners in the Community Project. GEO expanded the program at Ravenhall to include a Fines Clinic alongside our generalist clinic and education program. The Bolton Clarke Partners in the Community Project expanded to incorporate a clinic in Frankston along with a clinic in Glenroy. We have also expanded the ability of day and night services to respond to the needs of clients who do not fall within one of our specific programs.

MHLC also spent last year consulting and working with government reviewing implementation and effects of NDIS on existing legislation. To be able to work with stakeholders across these areas was both important and heartening particularly reflecting the Governments engagement

Manager's Update

strategy and willingness to speak with and listen to those delivering services.

The dedication demonstrated by the team at MHLC in the past year has been nothing short of extraordinary. The response and work ethic to support people in accessing the Royal Commission has been incredible from delivering forms and supports to prisoners, to contacting clients to ensure that they have engaged, to seeking consent and providing support to deliver personal statements.

The team within MHLC are confident that with the support of our partners we will continue to meet the legal and holistic needs of our clients and redefine how we measure their health outcomes. We are grateful to RMIT and the CIJ for the provision of support for the past year. We are also thankful to all our partners: Bolton Clarke, MIND, Mental Health Victoria, Gary Cazelaet and the University of Melbourne Law Apps program and Dove Ideal Project Solutions who work alongside us championing the work we do. MHLC would also like to acknowledge our funders who make everything that we can and do deliver possible: Legal Services Board & Commissioner, GEO, Department of Corrections and Community Safety, Igniting Change, Coopers Investors, Phyllis Connor Memorial Trust, Lord Mayors Charitable Foundation, The Myer Foundation, WCF Thomas and the Attorney Generals Department.

The MHLC is the sum of many parts and the team which makes all of this happen is so much than those listed in this report. It is now an army of people who we work alongside and collaborate, who help us define the services we deliver. They also

work with us in the media and use their influence across government. We would like to acknowledge our unsung army of heroes. You all know who you are and what you mean to this organisation and its future.

My final thanks goes to our clients who are always supportive of MHLC which is designed with them for them. We will continue to strive to provide a service which puts you at the centre and meets your needs.

Charlotte Jones
General Manager

The names and identifying details in case studies throughout this report have been changed to protect the privacy of the people involved.

Sue's* Story

It is always hard to find people to attend the hearings during the Christmas and New Year period but we work hard to find support for clients who have hearings at this time. It is a difficult time for people to find themselves on inpatient treatment orders and most services are closed down.

MHLC represented an elderly client, Sue, on New Year's Eve who was being held on a temporary inpatient treatment order. Sue had been in hospital since early December. She was a regular church goer and had been unable to enjoy the Christmas celebrations that were very important to her.

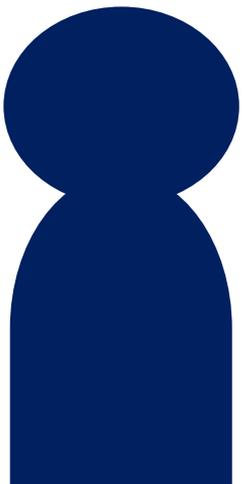
When asked what treatment she was receiving, Sue said none. A close examination of her medical file indicated that this was correct and that no medication had actually been administered.

At the hearing the MHLC argued that, as there was no immediate treatment being provided, there was no basis for an order. During the course of the hearing it was revealed that the purpose of the treatment order had been to keep Sue in hospital until a guardianship hearing that was scheduled 5 days later could take place. This was a clear misuse of the Mental Health Act. No order was made and Sue was released from hospital immediately. Sue should never have had to spend Christmas in hospital.

MHLC has since assisted Sue to obtain a court order releasing her car from impound without cost after it was taken from her by the police after her licence was incorrectly suspended by VicRoads. MHLC also assisted with the licence matter.

MHLC continues to assist Sue with upcoming matters of further MHT hearings and guardianship hearings.

MHLC is also very much a social support for Sue, a service which is much in demand now as vulnerable people find it more and more difficult to access case workers to assist them.



The MHLC Team

Manager
Charlotte Jones

Principal Solicitor
Ann Jorgensen

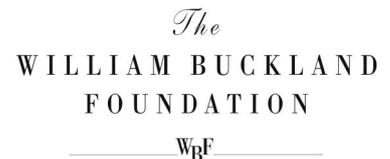
Lawyer	Kristina Bucak	Lawyer	Vanda Hamilton
Lawyer	Margot Powell	Lawyer	Lucy Carter
Lawyer	Cristiana Tomasino	Lawyer	Gram Morris
Lawyer	Jill Menius (until March 2019)	Lawyer, Night Service	Peter Cavanagh (until Jan 2019)
Paralegal	Sarah Duane	Administrator	Rory Slatter
Administrator	Lynne Hamilton	Administrator	Pamela Marrinan
Administrator	James Kyrios (until March 2019)		

RMIT Seconded Staff

Lawyer & Student Program Manager	Kate Ottrey Anna Howard (until Dec 2018)	Social Worker & Student Coordinator	Bernice Beaucaine Katherine Ogilvie (until Dec 2018)
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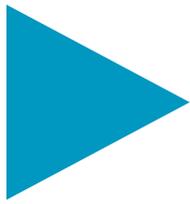
MHLC would like to extend our utmost gratitude to all our dedicated and talented volunteers who assist the centre across all of our projects. Without their hard work and commitment we would not be able to deliver the high quality service our clients have come to expect from the MHLC.

MHLC Supporters



Collier Charitable Fund





Royal Commission into Victoria's Mental Health System

The Royal Commission has presented an exciting opportunity for the MHLC to share what we do and to highlight the experiences of our clients as they navigate the mental health system. It has also presented a challenge – how does an organisation with limited resources and staff who are busy delivering frontline legal and support services contribute to such an incredibly important policy process?

At the MHLC it was very much a team effort and a credit to all of our staff for pulling together to get our extensive submission written. We met as a team regularly to workshop the key themes that we wanted to address and the evidence we had to support these themes. Staff spoke to clients about their experiences, prepared case studies, reflected on the work that they do and took on additional responsibilities to release our principal solicitor to draft the submission.

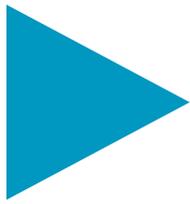
At the MHLC we support clients through all aspects of the mental health system and we have the opportunity to see where the system is working and where it is not. We hear so many individual stories through the phone calls our administrative staff take each day often from people who feel they have nowhere else to go, the calls to our night service for legal advice, the people we represent at the Mental Health Tribunal, the people we support to prepare advance statements and the people we assist to take action when they have received poor care. We also clearly see what happens when the system fails and people find themselves homeless or in prison due to a lack of responsive, integrated services.

As an organisation we wanted to draw on these stories to inform our submission and to make recommendations to the Royal Commission for meaningful reforms.

Some of the themes we covered in our submissions included:

- Individual choice and control
- Person-centred, individualised care
- Integrated approaches to whole of life services (including housing, income support and legal services)
- Oversight of the system
- Access to and oversight of mental health services within prison





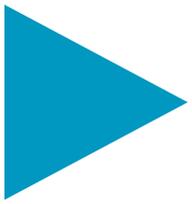
Royal Commission into Victoria's Mental Health System

In our submission we highlighted our different programs as examples of innovative approaches to integrated service delivery.

Some of the recommendations we made in our submission were:

1. The Royal Commission must ensure that the experience and expertise of people with a lived experience of mental illness are central to all of its deliberations.
2. An overarching independent commission with responsibility for monitoring, reviewing and driving improvements in mental health service delivery should be introduced in Victoria.
3. Public reporting of mental health data should be comprehensively reviewed with input from mental health consumers and carers to identify data to be reported and ensure it is presented in a way that is meaningful for consumers.
4. A system wide commitment is needed to significantly reduce the reliance on compulsory treatment in Victoria. Regular monitoring of the use of compulsory treatment should take place at both a service level and a system wide level.
5. Priority should be given to the resourcing of holistic, integrated service delivery models for people with serious mental illness with a focus on skilled and knowledgeable case coordination.
6. Legal services should be considered an essential component of any integrated model of service delivery.
7. The Mental Health Act should be amended to give advance statements more weight and to place a greater responsibility on treating teams to follow them.
8. The Mental Health Complaints Commission should be empowered to conduct own motion investigations into any public mental health service and the MHCC should be given greater powers to compel health services to participate in the complaints resolution process.
9. There should be an automatic right to legal representation for Mental Health Tribunal hearings and the MHT should have a co-ordinating function in arranging legal representation in Victoria.

We look forward to the release of the Royal Commission's interim report in November and to continuing to support our clients and to advocate for a mental health system that genuinely meets their needs.



Day Service

The Office is open and takes calls Tuesday to Friday from 9.00am to 5.00pm. The MHLC provides expert legal assistance for people with co-occurring mental health and legal concerns. These calls are triaged to ensure that people are directed appropriately to meet their needs.

Our phone statistics:



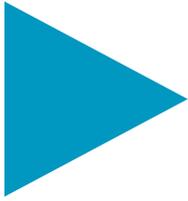
13252
incoming calls



9822
outbound calls



1508 hours
on the phone
That's 200 full
working days!



Mental Health Tribunal Hearings

In the last financial year we organised representation before the Mental Health Tribunal on 166 occasions. We also had three successful VCAT hearings; two were for Community Treatment Orders and the third an ECT order.

We work with many pro bono lawyers who make this possible and their hard work and dedication can change people's lives. It's through their support that we are able to help people. We also provide phone advice on MHT Hearings both during the day and through Night Service.

Special thanks to Robbert Roos who went above and beyond in assisting with hearings.

22
Inpatient
hearings

140
Community
hearings

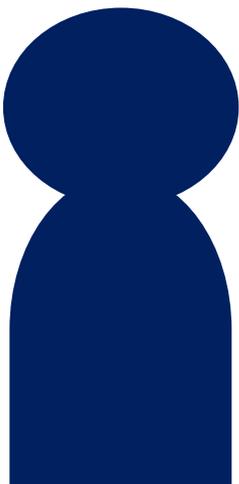
4
ECT
hearings

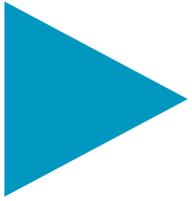
Case Study

In her early 20s Lisa* was admitted as an involuntary patient on an ITO. There were ongoing problems with her diagnosis; much of her reported behaviour had not been witnessed by the treating team but reported by other people. Lisa was released fairly quickly and had not been placed on any order. However, her medical record still existed. Two years later a hospital visit after a gas leak at her home turned into involuntary admittance and drug treatment as the treating team thought her claims were based on paranoia and hallucinations. She lost her home and her job.

As soon as Lisa could she began obtaining evidence of the gas leak; the plumber who caused the leak, the neighbour who reported it, the landlord who had organised the plumber and paid for the work, and the energy company who also knew about the problem. No one bothered to look at her material. In early 2019 MHLC represented Lisa at a MHT hearing. The lawyer was the first person to go through Lisa's material and see that in fact the gas leak was real. Her CTO was revoked immediately.

Lisa now has a new job and somewhere to call home.





Night Service

Our Night Service telephone legal advice line is an essential element of MHLC's provision of legal services to people with mental illness. This advice line operates on Tuesdays and Thursdays between 6:00pm and 8:00pm.

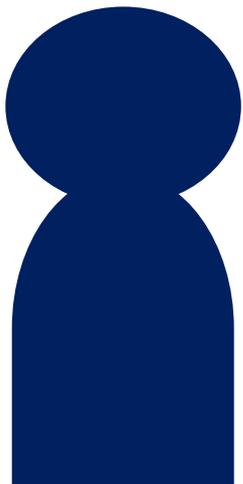
MHLC employs a solicitor and an administrator to co-ordinate, support and supervise a range of volunteers, from law students and paralegals, to solicitors specialising in a variety of legal fields. This broad range of dedicated volunteers has allowed us to expand the breadth of issues the Night Service is capable of taking on, whilst ensure that all legal services are delivered at the highest professional standard.

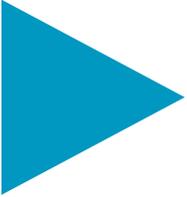
The Night Service is currently staffed by 52 volunteers, with solicitors and students, paralegals and legal graduates. Our Night Service delivered 531 legal services, and 1163 discrete actions. Whilst issues related to mental health law make up the bulk of our client's requests for assistance, problem types range from guardianship and administration issues, complaints to various oversight bodies, applications under Freedom Of Information legislation, tenancy issues, social security, problems arising from the NDIS, criminal law matters and property. Although we cannot provide advice in all specialist fields, we will always attempt to refer clients to services with which we have a relationship, be they firms, other community legal centres or specialist practices.

Additionally, our Multi Disciplinary Practice allows us to embed social work students to both increase valuable client-facing practical hours, and ensure that MHLC maintains a dynamic relationship between essential legal advice and social work practice.

Case Study

Candy* called in to the night service because she was unsure whether she could leave hospital. She had been there for around 24 hours. After speaking to Candy and an attending nurse, it became clear that Candy was a voluntary patient, and not on a compulsory treatment order. Despite this, staff at the health service had stated she could not leave without being seen by a psychiatrist. A night service solicitor explained Candy's rights to her, and spoke at length to the nurse; after explaining that, without an order in place, the health service could not keep Candy against her will, the health service agreed to discharge Candy and she was allowed to return home that night.





Advance Statements

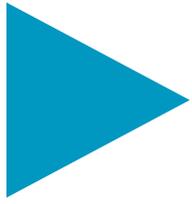
Advance statements are the key legislative tool available in Victoria to formally facilitate supported decision making. These were introduced under the Mental Health Act 2014 as an important component of its recovery-oriented framework. They were intended to ‘improve communication, give patients greater control over their treatment when they are subject to compulsory treatment and promote an improved patient experience and recovery.’ (Victoria, Legislative Assembly 2014, p 472).

Advance statements can be made at any time and allow for people experiencing mental illness to express and communicate their treatment preferences.

The MHLC has continued to support the uptake of advance statements in 2018/19. We assist people to complete advance statements through some outreach appointments, phone appointments (for people living outside of Melbourne), a weekly clinic at our office and the development of a new app. Our app is in the final stages of development and will allow a person to develop a basic advance statement online with the opportunity to further refine it and sign it with one of our team. We are very grateful the Melbourne University Law students for their hard work in the creation of this app. We also continue to provide training to the mental health workforce.

People who find themselves being treated under the *Mental Health Act 2014* (Vic) are often assumed to lack insight into their condition unless they voluntarily consent to antipsychotic medication. Drafting an Advance Statement enables people to demonstrate insight by detailing meaningful outcomes and strategies for their short and long term recovery that look beyond medication as the only option.

In the 2018-19 Financial Year we have assisted 35 clients to complete an Advance Statement and provided advice to over 50 consumers about the legal requirements, impact and therapeutic benefits of having one. This has largely been achieved by the efforts of a small group of dedicated law and social work students who have been assisting MHLC clients by delivering a weekly Advance Statements Clinic every Friday since March 2019. Advance Statements are the perfect intersection between law and social work and the project has given the opportunity for the next generation of lawyers and social workers to experience the benefits, issues and challenges of working collaboratively within a Multi Disciplinary Practice.



Bolton Clarke

Homeless Persons Project

Our health justice partnership with Bolton Clarke's Homeless Persons Program has continued to deliver positive outcomes for Victorians with multiple and complex needs who are homeless or at risk of homelessness.

The lawyers in the team partner with the nurses to provide assertive outreach services to some of the most vulnerable members of our community. These include people who are street homeless, living in crisis accommodation or in rooming houses and caravan parks. It also includes people at risk of homelessness and those who are newly placed in housing. An important aspect of the program is that the lawyers meet the clients where they are rather than expecting them to access formal appointments and centre-based services. The clients already have a relationship of trust with their nurses and MHLC can build on that relationship to quickly establish rapport and identify how to most effectively assist clients. The nurses facilitate contact with the client, in many cases attend client interviews, prepare support letters and help the lawyer to link into other service providers if needed.

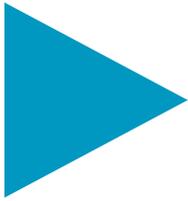
The lawyers assist with a broad range of legal issues and endeavour to address multiple issues for a client rather than having strict guidelines for assistance. The main areas of law are fines, debt, housing, access to health services, minor criminal matters not covered by legal aid, social security, MHT, family violence and crimes compensation.

Our quarterly education sessions have continued to be an important opportunity to strengthen the partnership between the Bolton Clarke and MHLC teams. The education topics are selected in consultation with the nurses. The sessions are practical in nature and highly interactive. The sessions help the nurses to recognise when a client has a legal issue so that prompt referrals can be made and the nurses can focus on providing clinical care and other supports.

Our clinic in Frankston has allowed us to reach more clients over a greater geographical area. This year we worked to set up a new clinic in Glenroy allowing us to provide more support in the outer northern suburbs.

An independent evaluator has been embedded throughout the project and has been key to ensuring that the project is effective, responsive and constantly improving. The independent evaluation also allows us to clearly see the evidence of impact.

Up until the end of June 2019 the project had assisted more than 215 legal matters. A large number of clients (30%) completed evaluation forms giving a clear insight into their experience of the service. Client satisfaction ratings are high (90%) and 95% of clients said that they would use the service again. 85.7% of clients reported that using the legal team had an impact on their wellbeing including less worry, sleeping better and improved mental health. The nurses also rate the program highly and 75% of them had referred clients to the lawyers. Nurses referring to the project had a 94% satisfaction score.



Bolton Clarke

Homeless Persons Project

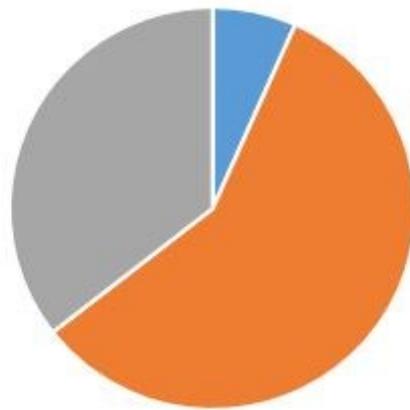
Case Study 1

Jules* was stopped by a number of ticket inspectors while she was standing at a tram stop. She said she felt intimidated and threatened by the ticket inspectors who asked to see her tram ticket and identification. When she refused and became upset, the ticket inspectors called Victoria Police.

Jules was subsequently charged with failing to produce a valid ticket, failing to give her correct name and address and using offensive language.

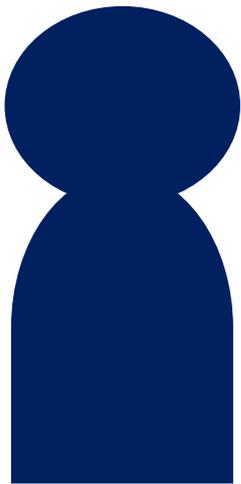
Jules has a long history of trauma, homelessness and mental illness. She was at that time subject to a community treatment order.

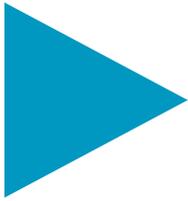
The MHLC obtained letters from Jules' psychiatrist, HPP nurse and other supports. On the day of the court hearing, these letters were shown to the prosecutor and Jules' circumstances explained. The prosecutor agreed to withdraw all charges and Jules was free to go.



■ Aged under 25 ■ Aged 25-49 ■ Aged over 50

31 Court/Tribunal Matters	61 Other Representations
41 Legal Advices	95 Active Files





Bolton Clarke

Homeless Persons Project

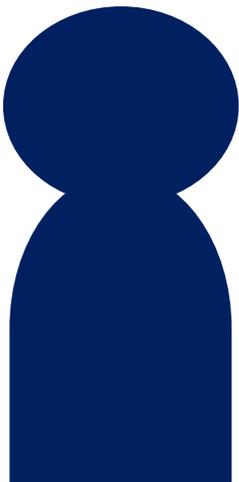
Case Study 2

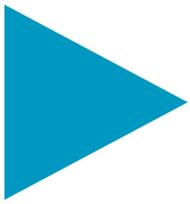
Liam* suffered from several serious health conditions that had an impact on his cognitive function. He also had a long history of depression. He lived in a community housing property that contained a mix of community housing tenants and private renters. Liam's housing had been stable for four years and he received a range of supports there including home care and nursing visits. Liam started to have some issues with bureaucracy that were causing him a lot of frustration. On two occasions he came home from dealing with these issues in an angry state and damaged a neighbour's property. The community housing organisation issued him with an immediate notice to vacate for danger.

Liam was referred to the MHLC by his outreach nurse at Bolton Clarke who had been working with him for many years. Liam was difficult to get a hold of by phone and our lawyer left many messages for him. While more traditional services may have been forced to give up, we were able to work with his nursing team to contact him when they were conducting a home visit. Our lawyer liaised with Liam's nurse, his GP and his support worker to prepare for the eviction hearing and opened discussions with the housing provider. We represented Liam at his tribunal hearing and his nurse and support worker attended with him.

The Tribunal accepted that Liam's actions were out of character and that he did not present an ongoing danger to other tenants. As a result of a multi-disciplinary team working together, he avoided the devastating consequences of immediate homelessness and the attendant loss of services.

Liam was also charged by the police in relation to the incidents. He had no criminal record and our lawyer was also able to represent him at court where he was granted diversion.





Community Legal Education

Inside Access conducts Community Legal Education (CLE) sessions at the Dame Phyllis Frost Centre and Ravenhall Correctional Centre. We constantly review our CLE program to ensure that it is engaging and meets the needs of persons in custody.

The sessions are specifically designed to provide practical, relevant and clear information. Topics have included:

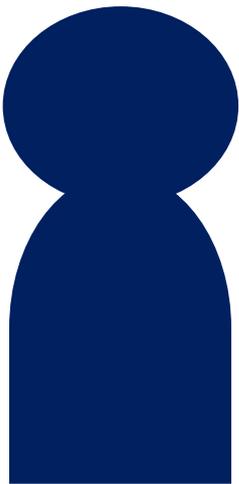
- Family Law and access to Children
- Family Violence and Intervention Orders
- Immigration and Deportation
- Fines & Infringements
- Debt and Money Management
- The Criminal Appeals Process
- Parole
- Prisoner's Rights
- Superannuation
- The Disability Support Pension
- Institutional Abuse Redress Scheme

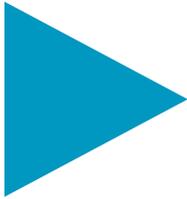
The sessions are delivered by either a solicitor from the MHLC or a solicitor from a pro bono partner firm who holds expertise in an area of law relevant to the identified needs of the prison population. By conducting the sessions in a participatory way the MHLC have been able to identify recurring areas of concern for prisoners and advocate for systemic change when needed.

This year saw some significant changes to the way CLE has been delivered at Ravenhall. The need for change was driven by the larger than expected number of remand beds at the centre. We have responded to this challenge by;

- Offering shorter list of more streamlined programs that are now offered more frequently (the same session will now run once a month or once every six weeks)
- Providing more information needed about the criminal justice process on the basis that upcoming court hearings are at the forefront of the remand prisoner's mind.
- Increasing the class size by opening them up a single session to all the communities.

Average attendance has increased and is now at 14 participants per session.





Community Legal Education

Case Study

A CLE session at Ravenhall Correctional Centre enabled the MHLC to identify and respond to the needs of prisoners who were facing deportation and successfully advocate to the Adult Parole Board on their behalf.

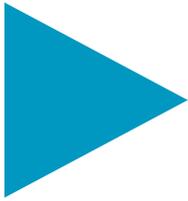
At a deportation session presented by WLW immigration lawyers it became apparent that many prisoners wanted to know more about the relationship between parole and deportation. For example if a parole application was granted to a prisoner who was going to be removed from Australia, would the applicant have to spend the remainder of their parole period in immigration detention or could they be removed from Australia even though they still had a substantial portion of their sentence to serve on parole?

Another question was whether parole would be granted to a prisoner facing deportation given that a prisoner who is removed from Australia is not able to be subject to their parole conditions. On the other hand if a prisoner is denied parole on the grounds they are subject to removal and has to serve their whole sentence in prison then they are in a significantly worse position than an identical prisoner who is not facing deportation. It was also important to retain the prospect of release on parole because it provides vital incentive for prisoners to undertake rehabilitation while in prison.

After the session Lawyers at the MHLC made repeated requests to the Parole Board for clarification regarding this issue and in September 2018 the Parole Board significantly expanded its stated policy towards prisoners who were subject to deportation. By advocating for clarity the MHLC were able to significantly improve the emotional wellbeing of prisoners who might otherwise have spent years in uncertainty. The information was also distributed to clinicians at the prison to ensure shared understandings amongst relevant stakeholders.

This example demonstrated the value of CLE sessions that:

- identify the needs of specific communities,
- allow those communities to participate in and control the information provided
- lead to advocacy that makes the legal system more accessible



Inside Access

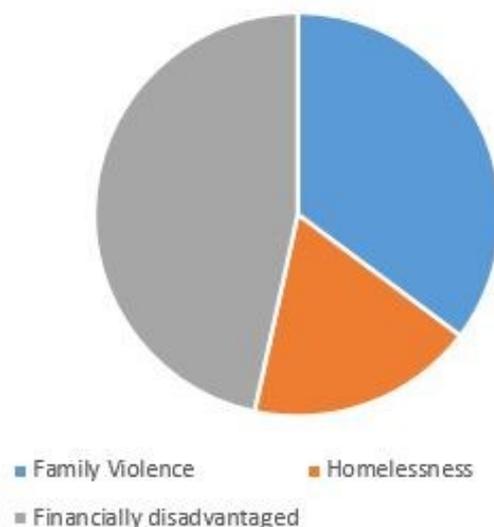
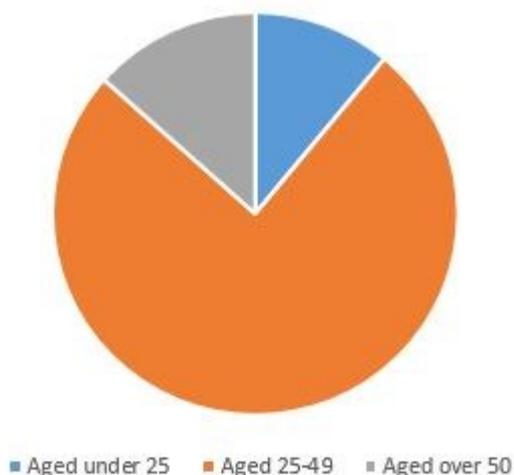
Dame Phyllis Frost

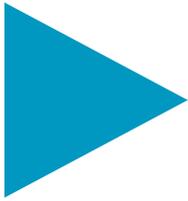
Inside Access has been running at DPFC for nine years providing a weekly outreach service. The team includes a generalist lawyer and co-ordinator, a specialist family violence lawyer and victims of crime lawyer, a specialist child protection lawyer, a fines lawyer and a social worker.

Inside Access is well respected by prison staff and importantly, the women in the prison. Referrals come almost entirely through word of mouth and through prison staff. Within Ravenhall we offer an education program along with a generalist clinic and a fines service.

Inside Access helps people within prison to transition back into the community by helping them to deal with their legal issues prior to release. This includes helping people to address outstanding fines, Centrelink issues and debts, supporting victims of violence to seek intervention orders or victims of crime compensation, facilitating contact with children and a range of other issues which cause stress and anxiety for people.

Clinics delivered	53
Appointments attended	914
Women seen at clinics	590





Inside Access

Dame Phyllis Frost

Case Study 1

Mary*, a citizen from another country, contacted Inside Access in relation to drafting and executing a Power of Attorney (POA) which would be enforceable in her country.

Inside Access contacted the embassy several times seeking advice on the relevant POA powers, and the enforcement of an Australian document in the country.

After several discussions with the embassy, we drafted and executed two POAs for Mary's mother and brother and posted these originals to them.

Mary was now reassured that her chosen attorneys were in a position to legally deal with her financial and legal affairs in her home country during her incarceration.

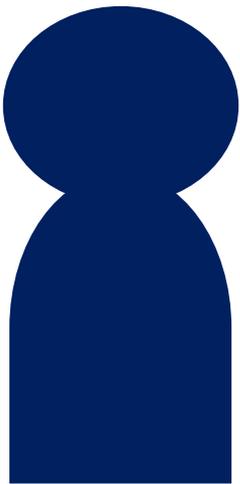
Case Study 2

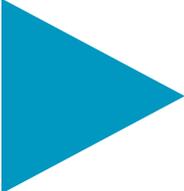
Jenny* contacted Inside Access in relation to an informal care arrangement for her child, Jess*.

Whilst Jenny is incarcerated, Jess is in the day-to-day care of her grandmother, Rose*. Rose requires access to child support services such as Centrelink for the care of Jess. Yet, Rose cannot access these services as she is not formally recognised as the day-to-day carer of Jess. Jenny wishes to provide Rose with this access but does not want to give up legal custody of Jess.

To provide Rose with access to child support services, Inside Access prepared the necessary documentation to have the care status of Rose formally recognised. Inside Access was able to provide Jenny and Rose with the necessary documents to formalise the informal care arrangement.

As a result, Jenny will retain legal custody of Jess, while Rose will be able to access the necessary child support services for the day-to-day care of Jess.





Inside Access

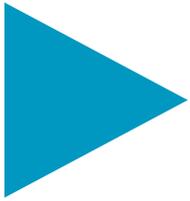
Dame Phyllis Frost

Case Study 3

Mindy* has five children and is in prison. She was expecting to be released but was then, unexpectedly, remanded on a second matter for trial. Once the second matter is completed she will have no more criminal matters to face.

Mindy's children are in different placements throughout Melbourne and Victoria. Inside Access was involved in the hearings in the Family Division of various Children's Courts (including regional). The Department of Health and Human Services applied for permanent care orders which Mindy initially opposed. The Inside Access lawyer persisted, over several appearances in the court, to try and establish detailed provisions for Mindy to have contact with the child after her release. DHHS was initially on board but then changed tack once the matter went to court. The magistrate did not accept our lawyer's arguments that the mother and child needed some certainty as to future contact as they believed this would undermine the permanent carer's position and wanted the matter to go to a future contested hearing. Our lawyer persuaded the Court to accept that the legislation did not bind the court to making the usual Orders and that other arrangements could be included as a notation to the Order so as to facilitate future access between mother and child whilst supporting the permanent care objective.

This case unmasked a systemic issue in the way in which a permanent care order can act to finally dislocate children from their birth families, especially where there is no possibility of direct communication between the carer and that family as to arrangements for future contact with the child.



Inside Access

Dame Phyllis Frost

Fines Clinic

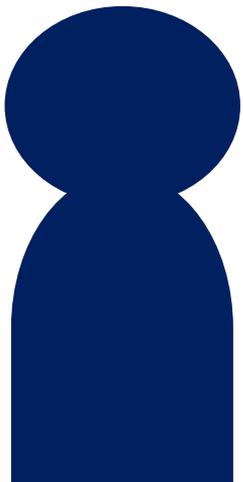
We have worked closely with DPFC and Fines Victoria to deliver a fortnightly fines clinic at the prison to streamline processes and ensure that women are able to apply to have their fines included as part of the 'time served' scheme. MHLC is able to represent clients at the Magistrates Court to have excess fines waived.

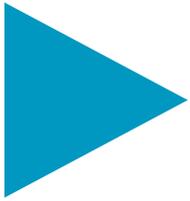
Case Study 4

Shan had a history of trauma leading to significant mental health issues and had experienced serious family violence. She started to take ice as a means of self-medicating and became addicted. This led to her imprisonment. Shan had accumulated a number of fines prior to her imprisonment totalling more than \$100,000.

Shan attended Inside Access's fines clinic a month before her release for advice about how to deal with them. Inside Access helped Shan to apply to have her fines "called in". Fines can be paid off at the rate of about \$160 per day. Shan's fines converted to over 700 days of imprisonment but her total term of imprisonment was only 120 days. This means that she had an excess of 580 days to serve to pay off all of her fines. Our lawyer represented Shan at the Magistrate's Court, two days before she was released, in an application to have the excess fines discharged on the basis of her special circumstances. We had obtained supporting material from Shan's criminal lawyer, support services she had used in prison and the community and medical centres she had attended. This material was presented to the magistrate who granted the application.

Shan left prison two days later able to start afresh with no outstanding fine debt.





Inside Access

Ravenhall

Beginning at the end of 2017, Inside Access opened a clinic at Ravenhall Correctional Centre.

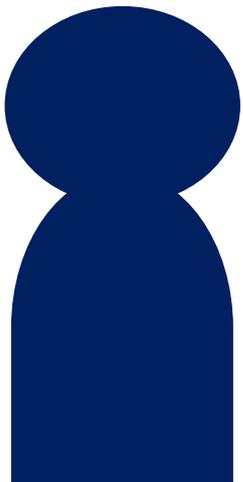
This legal clinic operates fortnightly and has a dedicated lawyer who provides advice and casework on a wide range of civil legal matters.

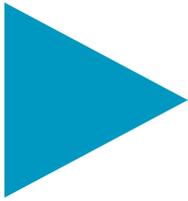
Our Community Legal Education program is integral to our service delivery at Ravenhall Correctional Centre. Each fortnight we hold multiple sessions on topics that the men in prison request themselves. This allows us to proactively engage with our attendees by providing information on issues that they feel effect them the most.

Case Study

Phillip has been incarcerated for over two years, and had lost contact with his mother. Phillip's mother has significant disabilities which prevent her from contacting him and leave her reliant on the goodwill of those around her. Upon investigation, it turned out that Phillip's uncle had also been separated from his sister. It seemed that Phillip's mother had been moved from her property without any consultation with Phillip or his uncle, both of whom were very close to her.

The Ravenhall clinic lawyer has assisted Phillip and his uncle to pursue enquiries in relation to the whereabouts of Phillip's mother. The Ravenhall clinic lawyer has negotiated with state trustees, VCAT, and the Office of the Public Advocate to reunite Phillip and his uncle with their mother and sister.





Inside Access

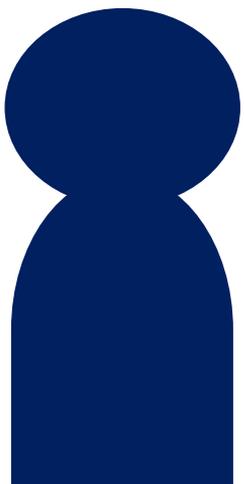
Ravenhall

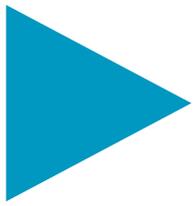
Client Feedback

The Ravenhall clinic lawyer received this email through a staff member from the prison:

‘Thank Vanda so much for her help and support. I appreciate what she has done for me so much. Not only did she help me sort out \$58,000 in fines, but she also helped me get a month taken of my sentence allowing me to be with my kids for Christmas, I’ll forever be grateful for that’

Total clients	245
Total services	259
Advices	82
Ongoing casework	138
Non-legal support	27





Inside Access

Ravenhall

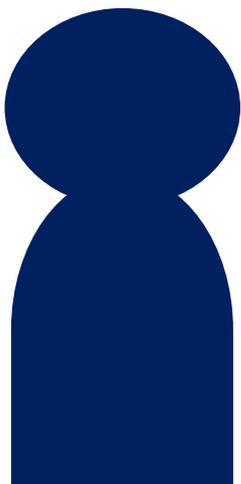
Fines Clinic

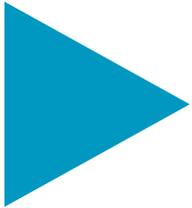
Studies have unanimously shown that a person released from custody with debt is more likely to reoffend and return to prison. It is not unusual for prisoners to have tens or even hundreds of thousand dollars in unpaid fines with no hope of paying it back. The worry and frustration that unpaid fines cause, compounded with other problems ex-prisoners face on release mean that helping people to leave prison without any outstanding fines leads to better outcomes for people released from custody, their families and the community.

In certain circumstances the *Sentencing Act 1991 (Vic)* and the *Fines Reform Act 2014 (Vic)* give prisoners the opportunity to 'call in' their fines without serving any extra time. While prisoners are by no means the only people to face difficulties in reading and understanding legal documents, they are disproportionately affected by cognitive impairment and poor comprehension skills and often have great difficulty understanding the process. Without access to timely and informed legal advice, many prisoners were choosing to forego the opportunity to call in their fines out of fear that completing the application forms would significantly delay their release date. The problem was exacerbated for prisoners with intellectual disabilities, acquired brain injuries and mental illness. The need for timely legal advice and representation – particularly when prisoners have a significant number of outstanding fines became obvious through our work on the *Inside Access* program at both the Dame Phyllis Frost Centre (DPFC) and Ravenhall Correctional Centre.

After the success of the Fines Clinic Pilot project at the Dame Phyllis Frost Centre in 2018, the project was launched at Ravenhall in March 2019 with immediate success. In just four months (March to June 2019) the Mental Health Legal Centre helped over 200 men imprisoned at RCC to 'call in' over \$1.5 million dollars in fines. In addition to our advice service we also assisted 35 clients with ongoing support and case work. This was either because they had significant excess fines and required representation in court, or their matter was complicated by issues such as mistaken identity or false nominations and they required legal advocacy at an administrative level.

The project has also uncovered significant failings at a systematic level which we have pursued with Fines Victoria to try and achieve better and fairer outcomes for many disadvantaged Victorians.





Multi Disciplinary Practice

The Multi Disciplinary Practice (MDP) is supported by the partnership between the Centre for Innovative Justice (CIJ) and MHLC. Our social worker (seconded by CIJ) works with RMIT social work students to deliver wrap-around, holistic services to our complex and vulnerable clients. The types of issues that the MDP assists with housing, community information and referrals, case management, advocacy, emotional support, child protection matters such as increasing contact and providing support with emergency aid.

Since the MDP began in 2016 it has been effectively embedded in the Inside Access program providing a range of support services to women at DPFC. While the MDP has continued to work closely with the Inside Access team, a key focus in 2018/19 has been to fully integrate the model across all aspects of MHLC's service delivery.

Our night service operates at a time when other services are closed and takes a range of calls from people with legal and other needs sometimes in a state of crisis. Social work students provide invaluable support to the night service team – helping with clients who are distressed or who need non-legal support to manage an issue. Clients needing additional support can be provided with ongoing support during the day.

A key initiative introduced this year has been a weekly advance statements clinic supported by the social worker and a lawyer. Social work and law students have worked together meeting with clients and assisting them to prepare advance statements. This clinic gives students the opportunity to work across disciplines, to have direct client contact and to learn from each other's approach.

The continued rollout of NDIS has had significant consequences for those of our clients who are unable to access the scheme. At the MHLC we are seeing an ever-increasing number of clients who have fallen through the gaps. They are in desperate need of coordinated support but do not fit within the criteria for particular programs. As a service that is generalist in nature we are often a last port of call for people who have been on the referral roundabout. Our social worker regularly takes on a case coordination role for individuals who have no other options or who face extensive wait lists to access alternative services.

Social work clients in 2018/19 by project:

Inside Access	70
Night Service	12
Bolton Clarke	5
Mental Health Tribunal	1
Post Release Support	5

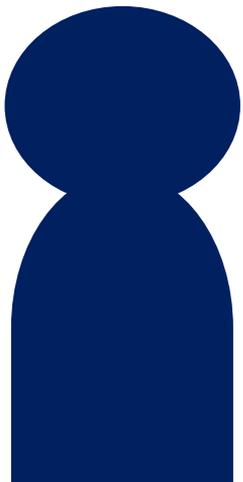


Multi Disciplinary Practice

Case Study 1

Rayna* is an Indigenous woman who has been repeatedly subjected to a cycle of incarceration at Dame Phyllis Frost Centre (DPFC) as a result of homelessness, family violence and substance abuse issues. Rayna presented at the Social Work Inside Access clinic as she wanted some support with a referral to a specialist drug and alcohol rehabilitation center in preparation for her release. Rayna also has two children who are currently in the care of the Department of Health and Human Services (DHHS) and expressed that she would like to improve her health and wellbeing so that she could start to develop a more positive relationships with them. During this meeting, Rayna also inquired to the status of her housing application and advised the social worker that due to safety reasons, she did not wish to be housed in certain areas and was unsure if this was stated in her application.

The social work program was able to refer Rayna to several community organisations including; mental health support, drug and alcohol rehabilitation and family violence support. Further, the social work program assisted in completing the relevant Office of Housing (OOH) application forms to ensure that Rayna's application was a priority due to her experiences of family violence and homelessness and to ensure that it was clearly stated that she was unable to be offered property in unsafe areas. Upon release, the social work program has continued to assist Rayna to ensure that she has the access to the supports that she requires in the community to ensure her safety, health and wellbeing.





Multi Disciplinary Practice

Case Study 2

Jenny* came to the Mental Health Legal Centre through our night service legal advice line. Jenny has a number of long-term chronic illnesses and physical disabilities and was experiencing homelessness as a result of long-term family violence and a lack of disability-appropriate accommodation. Jenny wanted to explore options for legal action against a housing service that she had previously been involved with over their repeated failures to accommodate her disability and safety needs. With Jenny's consent, Night Service workers referred her to MHLC social work for further assistance.

What emerged when MHLC social workers spoke to Jenny was an example of the many ways our siloed service-provision system allows the most marginalised people in our community to slip through the cracks. Jenny's safety concerns meant she could not stay in one place, but having no fixed address limited her access to most catchment-based services. Further, many services could cater to some of Jenny's needs but not others: those who could offer her housing had no suitable disability accommodation, and those who could offer her suitable accommodation could not ensure her safety needs were met.

MHLC was one of the first services to work with Jenny to find alternative options when presented with barriers. MHLC social workers advocated for Jenny's right to information security with Centrelink and the NDIS, securing privacy restrictions on her file that enabled her to reinstate her applications for the DSP and NDIS. Even where we could not achieve successful outcomes, MHLC were able to provide other avenues by, for example, securing written confirmation from services that could not meet her needs that demonstrated it was a lack of suitable services and not a willingness to engage that was proving a barrier to accessing supports. Jenny is a competent and capable young woman who knows the landscape of the service system well, oftentimes better than her support workers, but who had been placed in the 'too-hard' basket over and over again. MHLC support has ensured that Jenny has had at least one organisation willing to advocate for her rights while she continues to navigate a convoluted and disconnected human welfare system.

