# Mental Health Service Coordination in Southern Grampians

## **REFERRAL PATHWAYS MAPPING PROJECT**

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## Objective

To enhance the journey for mental health consumers and their carers in Southern Grampians by improving service coordination and partnerships across the mental health care continuum.

## Background

Recently, there have been several forums in which coordination of mental health services in Southern Grampians has been raised as an area for improvement. The emerging themes include access to services, coordination of services and collaboration of services. Initial presentation and comprehensive discussion of these themes with services providers in the region on 12<sup>th</sup> February 2015 has resulted in the following considerations for moving forward with the improvement of service coordination of Mental Health in Southern Grampians.

- Being creative with service delivery within existing resources, think about different ways of doing business
- Supporting the community to uptake technology to access more services
- Simplifying and coordinating information on what services are available in Southern Grampians (1 page document)
- Exploring opportunities to co-ordinate services better at a local level
- Continuing to develop new and existing partnerships to improve the consumer experience of the system, including looking at the wider community picture for the consumer.

## **Referral pathways mapping project**

As part of Southern Grampians Glenelg PCP's commitment to systems improvement, we undertook a small referral pathways mapping project to identify current services available, key referral pathways and opportunities to further develop partnerships in this area. The project involved

- Interviews with a range of service providers from the mental health sector
- Assessing pathways and ease of access to services
- Identifying key referral linkages and opportunities to enhance these linkages.

## Methodology

Mental Health service providers in Southern Grampians were invited to participate in an individual interview to discuss their services and the organisations they refer to. The interview consisted of 7 questions including:

- (1) Describe the services provided by your organisation
- (2) Describe the referral process to your organisation (access point, eligibility criteria, what happens if ineligible etc.)
- (3) List the main agencies you refer to and how would you rate the ease of access to that service (scale 1-5)
- (4) How would you rate perceived access to your service?
- (5) What are the strengths of the Mental Health service system in Southern Grampians?
- (6) What are the challenges of the Mental Health service system in Southern Grampians?
- (7) Ideas/Innovations/Suggestions to enhance the Mental Health service System?

7 service providers participated in interviews with 1 other service providing responses to some of the questions above via email. Participants included Mental Illness Fellowship, Southwest Healthcare (Adult MH Team), Hamilton Medical Group, ACSO, WDHS Counselling, Centacare, Private Psychology and WDHS Emergency Department. The interviews were conducted between April 1<sup>st</sup> – April 30<sup>th</sup> 2015 with each interview lasting between approximately 45-90 minutes. The interviewer took comprehensive notes during each interview. These notes were then de-identified and coded using a grounded theory approach to data analysis.

## **Key findings**

- Emergency/Crisis/After hours mental health management is an ongoing area for improvement, particularly with relationship to policy and procedure for management of acutely unwell psychiatric presentations to Hamilton Base Hospital and other organisations.
- There are historical relationships which in many cases are an asset to partnership development but in some cases are inhibiting potential of working relationships and referral pathways.
- Complex clients who do not fit selection criteria are falling through the system (e.g. not acutely unwell enough for psychiatric services, limited other inpatient/community options).
- There is a range of services available, some are overloaded with referrals and caseload, and others are lacking referral numbers. It appears that as some clinicians are not fully aware of the breadth of available services, therefore may not be referring on to other services equipped to provide an appropriate service. Issues of trust between clinicians was raised by several respondents as an area of concern with lack of referrals.
- Lack of youth services and connectivity back into the community is also identified as a key factor, solutions for enhancing opportunity to engage young people with mental illness are sought after in the region.
- Private psychology services play a pivotal role in integrated care for complex clients.

## Services Available - Tertiary

Psychiatric Inpatient Service - Warrnambool	
Provider	Southwest Healthcare
Description	15 bed psychiatric Inpatient Unit and Extended Care Inpatient Unit
Referral	5563 1222 or 1800 808 284

Adult Mental Health Services - Hamilton	
Provider	Southwest Healthcare
Description	Provides assessment and treatment for consumers / patients aged 18-65 years who are affected by a serious mental illness
Referral	5551 8418

Aged Persons Mental Health Service	
Provider	Southwest Healthcare
Description	Provides assessment and treatment for consumers / patients aged 65 years and over who are affected by serious mental illness or behaviour problems associated with dementia
Referral	5561 9100

Child & Adolescent Mental Health Service	
Provider	Southwest Healthcare
Description	Provides family inclusive assessment and treatment for infants, children and young people up to 18 years of age, with significant mental health concerns
Referral	5561 9100

Emergency Department – Hamilton Base Hospital	
Provider	Western District Health Service
Description	Provides 24 hour emergency medical care for the community and is a designated Regional Trauma Service by the Victorian Department of Health &Human Services.
Referral	5551 8216

## Services Available - Secondary

Mental Illness Fellowship	
Provider	Mental Illness Fellowship
Description	Provides community based rehabilitation for people with mental illness, their families and their friends in order to gain inclusion into communities; to create a home, get a job and build meaningful relationships. Support is provided through recovery, education and advocacy programs.
Referral	1300 022 760 (through ACSO); Hamilton Office - 5551 3470

Early Intervention and Dual Diagnosis Team	
Provider	Southwest Healthcare
Description	Aims to provide an early intervention service for people aged 16-25 years, including those who may be 'at risk' of developing a serious mental illness, due to a range of vulnerabilities including substance use
Referral	5551 8418

Primary Mental Health Team	
Provider	Southwest Healthcare
Description	Offers support to General Practitioners and other Primary Care Providers to identify, assess and treat consumers / patients diagnosed with high prevalence disorders such as depression and anxiety. Referrals by Primary Care only.
Referral	5564 6000

Glenelg and Southern Grampians Drug Treatment Service (Quamby)	
Provider	Portland District Health
Description	Services including inpatient and outpatient withdrawal service, youth outreach, support individual/family supported accommodation, diversion programs, drink/drug drive programs, counselling & referral
Referral	1300 022 760

MIND PHaMs (Personal Helpers and Mentors)	
Provider	MIND Barwon South West
Description	Provides community mental health services with outreach support to people aged 16 years and over, supporting them in their recovery from mental ill-health to build and sustain self-defined, purposeful lives.
Referral	1300 286 463; 5500 1003

## May 28, 2015 Southern Grampians Glenelg Primary Care Partnership

Headspace	
Provider	Headspace Warrnambool
Description	Inreach services (part-time) provided for young people aged 12-25 at Monivae College and Windamara. Full Headspace services provided at Warrnambool Headspace.
Referral	1300 276 749; www.eheadspace.org.au

eheadspace	
Provider	eheadspace
Description	eheadspace is a confidential, free and secure space where young people 12 - 25 or their family can chat, email or speak on the phone with a qualified youth mental health professional
Referral	www.eheadspace.org.au

Private Psychology	
Provider	Various providers
Description	Providers of private psychology services, Medicare Better Access initiative and the ATAPs initiative
Referral	Refer to Psychology providers listed on the Australian Psychological Society website: - <u>http://www.psychology.org.au</u>

Health Psychology	
Provider	WDHS
Description	Provision of psychological assessment and interventions to address the needs of clients with chronic illness with a focus on anxiety, depression, pain, symptom, weight management, adjustment and coping.
Referral	5551 8087; 5551 8379

ACSO	
Provider	ACSO
Description	Consumer Intake Assessment line for Community Mental Health Support
	Services and Alcohol & Drug Treatment Services
Referral	1300 022 760

## Services Available - Universal

Hamilton Medical Group	
Provider	Hamilton Medical Group
Description	General Practitioner services providing diagnosis and treatment of Mental Health conditions and liaison with relevant specialists and practitioners. Better Access MH plans and ATAPs available.
Referral	5572 2422

Headspace	
Provider	Headspace Warrnambool
Description	Inreach services (part-time) provided for young people aged 12-25 at Monivae College and Windamara. Full Headspace services provided at Warrnambool Headspace.
Referral	1300 276 749; www.eheadspace.org.au

Counselling Service (Frances Hewett Community Centre)	
Provider	Western District Health Service
Description	Provides generalist counselling support to people who wish to discuss issues that affect their emotional wellbeing. Counselling provides the opportunity to discuss concerns and work through options that may assist and improve the situation. Referrals accepted for all age groups.
Referral	5551 8450

<b>Centacare Hamilton</b>	
Provider	Centacare Warrnambool
Description	Provides part time family and relationship counselling, family dispute resolution, separation, divorce, mediation. Can work with children in the context of family relationship counselling.
Referral	5572 4466; 5559 3000

CASA (Centre Against Sexual Assault)	
Provider	SWCASA
Description	Advocacy and counselling services to victims / survivors of sexual assault,
	their non-offending family members, partners and friends
Referral	5564 4144; Sexual Assault Crisis Line – 1800 806 292

Emma House	
Provider	Emma House Domestic Violence Services
Description	Outreach, court and accommodation services for women and their children who have or who are experiencing domestic/family violence
Referral	5561 1934; 5551 8450

Brophy (Frances Hewett Community Centre)	
Provider	Brophy Family and Youth Services
Description	Provides family service programs including family counselling, support and advice for parenting and behaviour management, group work, mediation and case management as needed.
Referral	Referrals through Child FIRST – 1300 543 779; 5551 8556

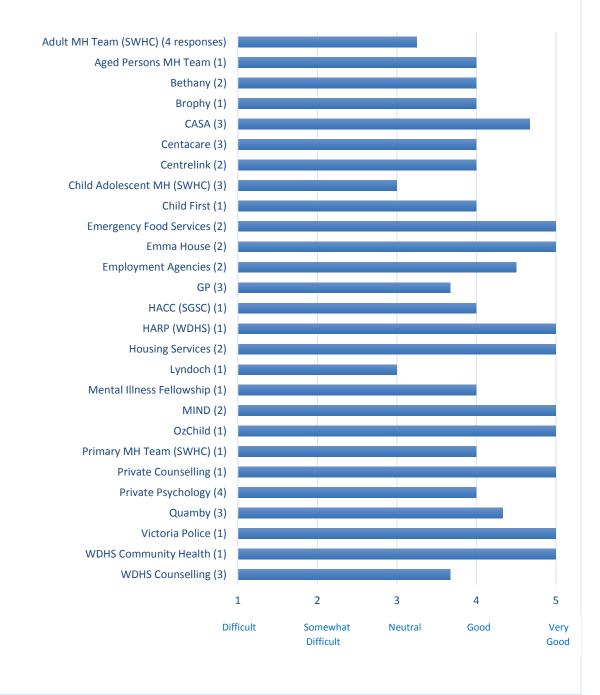
Bethany (Frances Hewett Community Centre)	
Provider	Bethany Warrnambool
Description	Provide child and family services, financial counselling, problem gambling and housing support on a part-time basis in Southern Grampians. Based at Frances Hewett Community Centre.
Referral	1300 510 439

Oz Child	
Provider	Oz Child
Description	Family law program, family dispute resolution, counselling, emergency relief, no-interest loan scheme
Referral	1300 661 790

Salvo Connect	
Provider	Salvo Connect BSW region
Description	Coordinates emergency, transitional and short-term housing for adults and families
Referral	5572 5822; 1800 825 955

**Referral relationships** 

## Which agencies do you refer to and how would you rate the ease of access to that service?



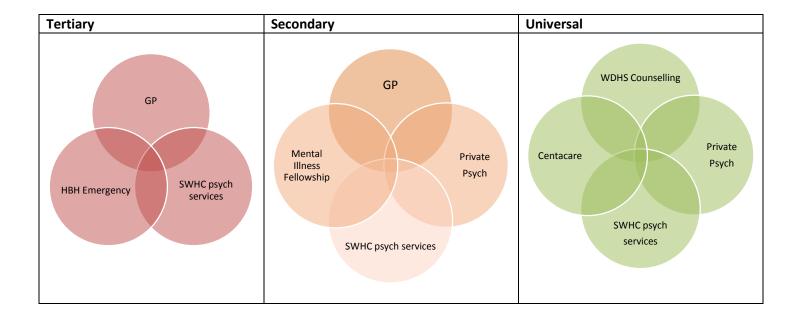
The response to this question varied greatly and was dependent on the nature of the organisation. For example, services focusing on rehabilitation and engaging people back into the community had larger referral networks while others are able to cite 3-4 key specialist services in which they referred to regularly. One respondent was unable to answer the question, stating that they made the suggestion for follow up with other services to the client, giving them ownership of the referral, therefore being unable to rate the ease of access specifically.

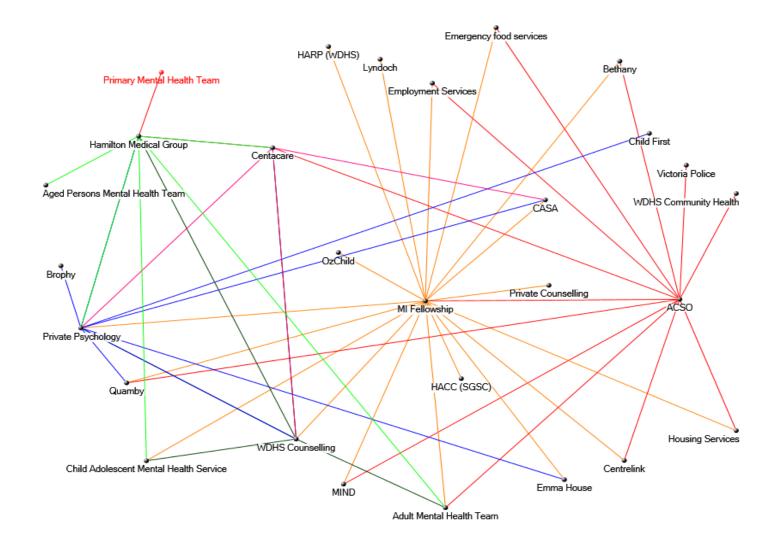
Qualities that made ease of access good were timely response to queries, clearly communicated eligibility criteria and straightforward referral procedures. Some of the access challenges included services having limited resources/capacity to take on more referrals, clients not fitting the right criteria for eligibility, and recent changes to intake procedures at various organisations.

When asked to rate ease of access to their own service, the average response was 3.67 (between neutral and good). Some organisations felt they had a low profile in the region, while others felt they were easily accessible with a straightforward phone call and immediate response time as part of their service. Many organisations have streamlined their access procedures in recent times, including central point of intake or having measures in place to address immediate concerns.

The interviews highlighted a great variability in the knowledge of available services in the sector, with some respondents fully aware of all services offered in the region and others unaware of the breadth of services.

Of the interviews undertaken, there is evidence of some key relationship hubs within the acute, secondary and universal services:

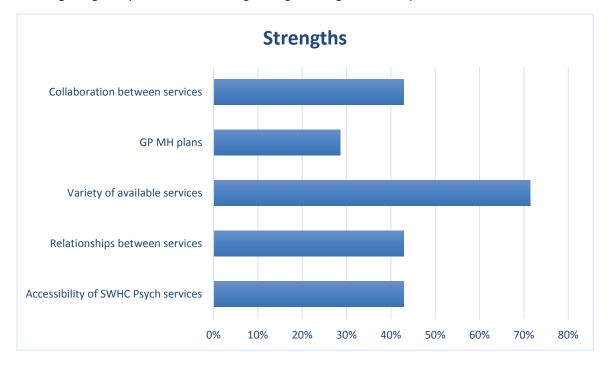




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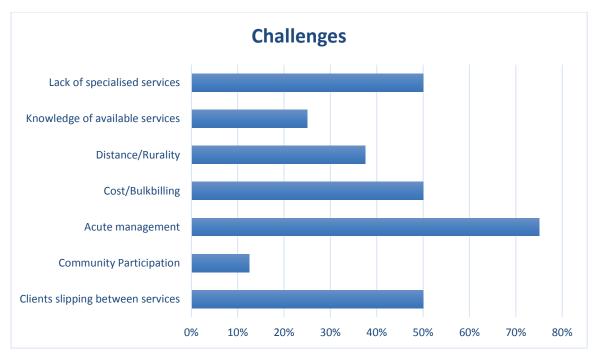
## Strengths of the Mental Health Service System in Southern Grampians

There were seven responses to the strengths of the Mental Health service system which have been grouped into 5 main themes outlined below. Many respondents felt there is a good range and variety of basic services available, however believed that there was sometimes little knowledge of all the available services in the wider community. Interestingly, the respondents who identified relationships as a strength were the same respondents who felt there was good collaboration between services. Accessibility and responsiveness of adult Mental Health services was also cited as a strength, again by those with existing strong working relationships.



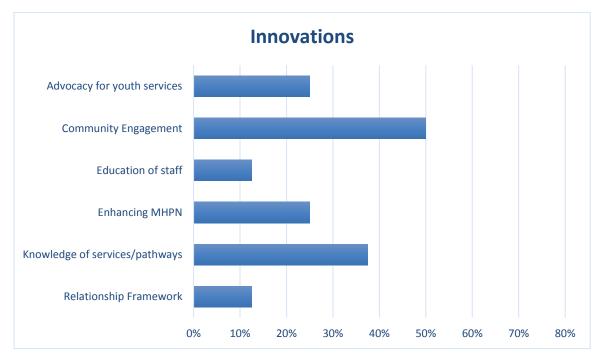
#### **Challenges of the Mental Health Service System in Southern Grampians**

There were eight responses to the challenges of the Mental Health service system which have been grouped into the main themes outlined below. 75% of respondents indicated acute crisis and after hours management as a major challenge. For some respondents, this was related to confusion around the referral process from Hamilton Base Hospital Emergency Department to SWHC psychiatric services, while others were feeling challenged by the appropriate management procedures for acute presentations in their organisations or in the community. Another factor identified was complex clients who were not unwell enough for acute Mental Health services posing challenges to community workers, many felt these clients were slipping through the system. Limited access to bulk billed GP services was cited as a challenge, as was the lack of specialised services for specific cohorts or those with complex conditions (e.g. youth services, eating disorders, Acquired Brain Injury).



## Ideas/Innovations/Suggestions to enhance the Mental Health Service System

There were eight responses to the question of ideas/innovations/suggestions to enhance the Mental Health service system which have been grouped into the main themes outlined below. Half of the respondents identified better community engagement around mental health as a priority, focusing on destigmatising mental illness and giving consumers the knowledge to make choices about their care. Enhanced knowledge of services and improvement to education of acute pathways was also highlighted as an area for improvement. Others commented on the network aspect of the mental health sector, giving consideration to enhancing already existing networks (e.g. Mental Health Professionals Network) to give rise to broader partnership development. Advocacy for greater access to youth services was also highlighted as a suggestion.



#### Recommendations

- (1) Clearly established and communicated policy and procedure for emergency mental health presentations to Hamilton Base Hospital (e.g. updated acute policies actioned and communicated appropriately to all relevant staff). Ongoing mental health disorder professional development for staff as required.
- (2) Clearly established, communicated and implemented policy and procedure for emergency mental health presentations at community organisations.
- (3) Review of existing networks and partnerships (Mental Health Professionals Network, Emergency services network, Strategic Partnership for Youth, SGG Primary Care Partnership) and potential to enhance their role in harnessing open communication and relationship development between services.
- (4) Development and distribution of A3 one-pager highlighting current Mental Health services available in the Southern Grampians Shire to promote knowledge among service providers and opportunities for referral partnerships (led by Southern Grampians Glenelg PCP)
- (5) A whole of community approach to build on new and existing relationships in the mental health sector (e.g. An integrated knowledge forum for consumers and service providers discussing key topics, community ideas/innovations, creative opportunities to promote good mental health) led by Southern Grampians Glenelg PCP.
- (6) Further exploration of youth specific services in Southern Grampians and opportunities for reconnecting disengaged youth with mental illness.

## Conclusion

With the number of mental health services available in Southern Grampians seen as a relative strength, it is integral that the working relationships between these organisations continue to develop. For the consumers, good communication and partnerships between services is essential to them receiving the high quality of collaborative care they deserve. With often evolving workforce landscapes, knowledge and communication of the services available is key to ensuring clinicians are well-equipped to provide the best care for their clients. Sound and well-communicated policy and procedure for acute psychiatric presentations (both at hospital and in the community) is required to give staff the confidence to act appropriately in confronting and often stressful situations. With recent changes in funding to the youth sector locally, it is highly recommended that a collaborative approach on youth services in the area be addressed, in order to maximise the potential of young people with mental illness in our community. Southern Grampians Glenelg Primary Care Partnership is committed to supporting agencies to further develop the relationship potential in the sector.

## **APPENDIX 1**

