

### **Gold Coast Primary Health Network**



Head to Health Phone Service

Supporting Minds – Moderate Intensity MH Service

Practice Managers Breakfast – 8/2/23

# **Head to Health Phone Service – What is it?**



Head to Health is a Federal Government initiative that aims to open the door to an eco-system of mental health services.

The *Head to Health* initiative that aims to stop people falling through the gaps.

#### The Model

- PHNs around the country now deliver Head to Health (H2H)
   Information and Referral (IAR) telephone service.
- The number can be called from anywhere in Australia.
- Callers will be prompted to enter their postcode.
- Callers who enter a postcode in our PHN region will be transferred to our Head to Health team.

#### **HEAD T CONTROL HEALTH**

We find the mental health support that's best for you

1800 595 212

#### **Head to Health Phone Service**



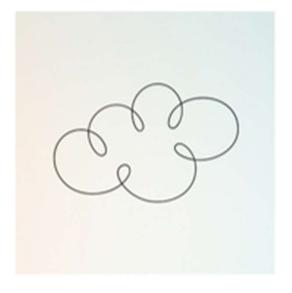
#### **GOLD COAST**

Provider - Primary and community Care Service Replaces the old Referral and triage Service



Head to Health centres

\*Not yet in our PHN\*



Head to Health website

National



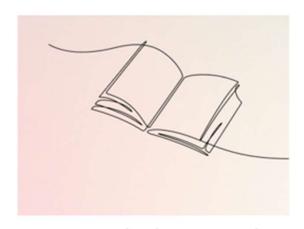
Head to Health phone line

National

# Head to Health Phone Service – How does it work?



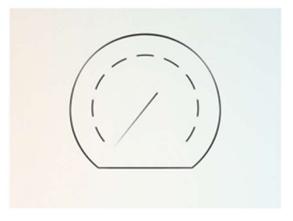
Every client linked to Head to Health receives some degree of service navigation, based on what the client wants. Clients may receive **one or multiple** of the below:



A personalised services guide

Created by a Head to Health Intake officer.

Filled with service information tailored to the client (service summary, location, contacts etc.)



An assessment of their needs

Clients are offered an assessment of their needs to determine a suitable level of care.

This assessment is called the IAR-DST.



A referral to a service

If the client wishes, a referral is made on their behalf.

The referral involves the sharing of key information to avoid the client having to tell their story twice.

# Head to Health Phone Service – How to I access the service?



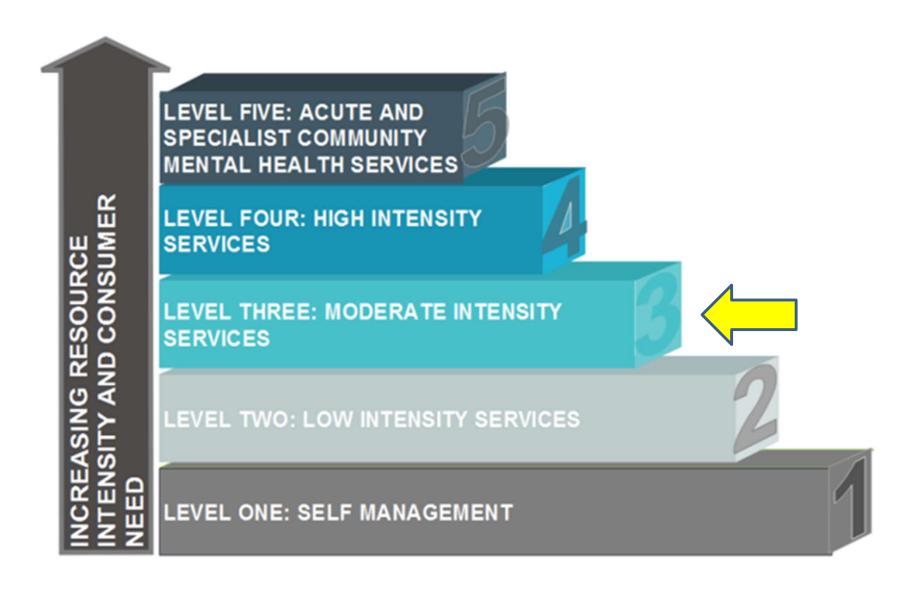
HEAD TO HEALTH

What's on your mind? Get it out in the open.

1800 595 212

# **Supporting Minds: Moderate Intensity Service**





# **Background - Stepped Care: Moderate Intensity Service**



An Australian Government Initiative

Level of Care 1

Self Management 6.4 million people

Typically no risk of harm, experiencing mild symptoms and/or no /low levels of distress- which may be in response to recent psycho-social stressors.

Symptoms have typically been present for a short period of time.

The individual is generally functioning well and should have high levels of motivation and engagement.

Level of Care 2

Low Intensity
1.2 million people

Typically minimal or no risk factors, mild symptoms/low levels of distress, and where present, this is likely to be in response to a stressful environment.

Symptoms have typically been present for a short period of time (less than 6 months but this may vary).

Generally functioning well but may have problems with motivation or engagement. Moderate or better recovery from previous treatment Level of Care 3

Moderate Intensity 1.6 million people

Likely mild to moderate symptoms/distress (meeting criteria for a diagnosis).

Symptoms have typically been present for 6 months or more (but this may vary). Likely complexity on risk, functioning or co-existing conditions but not at very severe levels.

Also suitable for people experiencing severe symptoms with mild or no problems associated with Risk, Functioning and Co-existing Conditions Level of Care 4 High Intensity 400,000 people

A person requiring this level of care usually has a diagnosed mental health condition with significant symptoms and/or significant problems with functioning.

A person with a severe presentation is likely to be experiencing moderate or higher problems associated with Risk, Functioning and Co-existing Conditions. Level of Care 5 Acute and Specialist 350,000 people

A person requiring this level of care usually has significant symptoms and problems in functioning independently across multiple or most everyday roles and/or is experiencing:

- Significant risk of suicide; self-harm, self-neglect or vulnerability.
- Significant risk of harm to others.
- A high level of distress with potential for debilitating consequence.

Evidence based digital interventions and other forms of self-help Services that can be accessed quickly & easily and include group work, phone & online interventions and involve few or short sessions

Moderate intensity, structured and reasonably frequent interventions (e.g., psychological interventions) Periods of intensive intervention, typically inc. multi-disciplinary support, psychological interventions, psychiatric interventions and care coordination

Specialist assessment and intensive interventions (typically state/territory mental health services) with involvement from a range of mental health professionals

### **Populations in Scope**



- 1. Indigenous Children in Care (0 19 years) with a mental illness
- 2. Youth (12 24 years) and adults within the LGBTIQAP+ community with a mental illness and who require culturally specific support.
- 3. Adults (16+ years) with a mental illness and who present with other situational factors such as: homelessness or at risk of homelessness, domestic violence issues, current legal issues, financial hardship.

## **Progress Update**



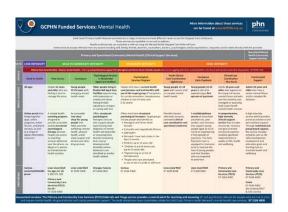
Priority Population Group	Provider	Progress
Indigenous Children in Care (0 – 19 Years)	Kalwun – under negotiation	<ul> <li>Negotiating with Kalwun</li> <li>Possible establishment of services from March 2023</li> </ul>
Youth (12+ years) and adults (18+ years) who identify as LGBTQIAP+	Wesley Mission QLD	<ul> <li>Service is under establishment</li> <li>First clients to commence in early March 2023</li> <li>Hoping for full service establishment by end April 2023</li> <li>Referral pathway - H2H Phone service</li> </ul>
Adults (16+ years)	Wesley Mission QLD	<ul> <li>Service is under establishment</li> <li>First clients to commence in early March 2023</li> <li>Hoping for full service establishment by end April 2023</li> <li>Referral pathway - H2H Phone service</li> </ul>

### Other changes underway......



- Transitioning of service with existing PSP providers progressive decommissioning of providers to 30/6/23
- Working with PCCS H2H Phone Service
- Update of GP Referral Form in consultation
- Utilisation of Supporting Minds Advisory Group (Change Management)
- Communication to key stakeholders including:
  - GPs (commencing this week)
  - Other MH orgs in the region (in progress)
  - Consumers Fact sheet on changes (complete)
  - GCPHN website (complete)
  - GCPHN commissioned services update
  - Clinical Council





### **Questions for Clinical Council**

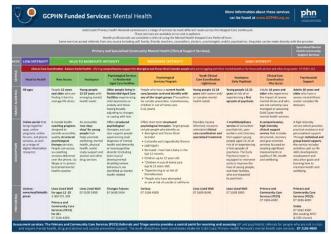


- GP Referral Form
  - Consider H2H Phone service role
  - Value/Purpose moving forward
- Communication regarding change
  - 1:1 meetings with common GP referrers



- Webinar
- Information Session





- Other channels for GPs and allied health to communicate services available
  - H2H Phone Service
  - Supporting Minds



#### Building one world class health service for the Gold Coast

Level 1, 14 Edgewater Court Robina QLD 4226

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