

A state-wide initiative led by Victoria's six Primary Health Networks (PHNs)













We acknowledge the traditional owners of the lands on which we work and live. We pay our respects to their elders past, present and emerging, and extend that respect to all Aboriginal and Torres Strait Islander people.

We also recognise, respect and affirm the central role played in our work by people with lived experience, their families and/or carers.

### Additional support in the COVID-19 pandemic



HeadtoHelp hubs will offer multidisciplinary, evidence-based team care that is integrated with existing services

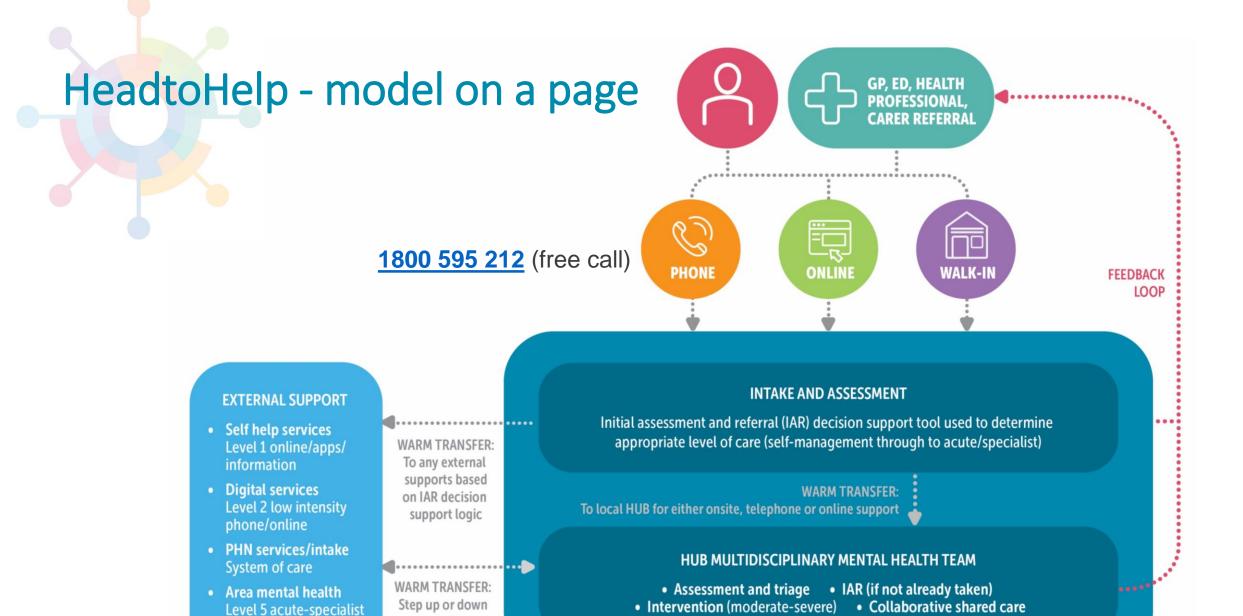
Providing on-site mental health support, as well as telephone and online support for those who cannot easily get to hubs

With access to multidisciplinary teams of mental health workers, including psychologists, mental health nurses, social workers and alcohol and other drug workers

With referral to external support to appropriate level of care: step up or step down

### Overview

- 15 clinics across Victoria (nine in metro, six in regional areas)
- Start date: September 14
- \$26.9m for 12-months via PHNs; \$5m for digital and phone support
- Supported by Victorian Mental Health Pandemic Response Taskforce
- HeadtoHelp hubs will connect and integrate with local service system to ensure right care in the right place at the right time
- Mental health support across the community, particularly those impacted by COVID who have never experienced mental ill health before
- Model is scalable and can be replicated if/when funds permit
- PHN-based soft launch campaign (digital) "help is available"
- Followed by state-wide awareness campaign



as needed to any

external supports

service

## "No wrong door" with intake and referral



Initial Assessment and Referral (IAR) is focused on guiding initial assessment and supporting informed decisions about suitable and appropriate treatment choices/options (finding the right service type and intensity)

# Initial Assessment and Referral (IAR)



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#### **Level of Care 2 Low Intensity**

### **Level of Care 3 Moderate Intensity**

#### Level of Care 4 **High Intensity**

### Level of Care 5 **Acute and Specialist**

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.

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

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

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.

A person requiring this level : 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

### **Hub locations**







### More information

Website: <a href="https://headtohelp.org.au/">https://headtohelp.org.au/</a>

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