Mental Health Access   Procedure

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There are three (3) ways that patients can access mental health services

Quick reference guide

TARGET AUDIENCE and SETTING

This procedure applies to all Mental Health Program staff and Aged Persons Mental Health Services clinical staff working in services that provide access to services to the general public.

This procedure applies to all settings that provide access to the Mental Health Program, these include Psychiatric Triage Service (PTS), Emergency Psychiatric Services (EPS) and other services where patients/consumers can access services directly through 'Direct Referral'.

PURPOSE

This procedure will outline pathways to access services within the Mental Health Program. Three main pathways via Mental Health Triage services, Direct Access and External direct contact enable clear pathways to mental health care.

DEFINITIONS

Direct access:

- Access in person into Emergency Department (Casey/Dandenong/Clayton) 24/7

External Direct access:

- via specific referral form or relevant contact number, Monday to Friday

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PRECAUTIONS/CONTRAINDICATIONS

- Where a person is ineligible for service, or resources are unavailable, appropriate support and assistance is provided to access relevant services.

- If risk of a protective nature is identified refer to Family violence operational policy

- For information the referral process, refer to Clinical handover patient discharge or transfer Mental Health procedure and implementation tool.

EQUIPMENT

- Client management interface (CMI) database
- Electronic Medical Records (EMR)
- Scanned Medical Records (SMR)

STANDARD REQUIREMENTS

When undertaking any clinical interaction with a patient, staff are expected to:

- Perform routine hand hygiene. Refer to the Hand Hygiene Procedure.
- Introduce themselves to the Patient and Carer/ Family if in attendance
- Check patient identification. Refer to the Patient Identification Procedure.
- Obtain consent as per the Consent to Medical Treatment Procedure.
- Keep the patient/carer informed and involve them in decision making.
- Document interaction in the electronic medical record or health record using black pen; including date, time, signature and designation.

PROCEDURE

MENTAL HEALTH TRIAGE SERVICES

Psychiatric Triage Services (PTS) and Aged Persons Mental Health Service Triage

The Psychiatric Triage Service (PTS) provides 24 hour telephone access to the Mental Health Program via 1300 369 012.

The Aged Persons Mental Health Service Triage operates during business hours Monday to Friday 0900-1630 via (03) 9265 1750. Outside of business hours, referrals can be made through PTS.

What Mental Health Triage service cannot provide:

- A directory phone number for internal and/or external services;

- Receive back a referral that has been mobilised to a team;

- Follow up post mobilisation to a team;

- Follow up to clinical alerts

The Triage clinician will:

- Undertake initial screening assessment and information gathering to identify situation, needs and risks

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- Record information gathered directly onto CMI

- Triage as per the Statewide Mental Health Triage Scale

- Determine level of response and services to be provided, based on the following scale:

  - Code A: Immediate action - Ambulance & Police

  - Code B: Within 2 hours

  - Code C: Within 8 hours

  - Code D: Within 72 hours (3 days)

  - Code E: Non-urgent mental health response > 3 days

- Seek consent to share information to the internal mental health team from the person requiring mental health service

- Appropriately communicate outcome and response timelines to consumer/patient and/or referral source

- Forward a copy of mobilisation report and any accompanying information to the appropriate service area for relevant response

- Contact the service being mobilised to confirm mobilisation report and provide handover in line with the [Clinical handover forms Mental Health implementation tool](#)

- If Triage rating or information gained does not fit criteria for mental health services within Monash Health, provide information and appropriate assistance to access other services within the caller's catchment area.

PTS Service Agreements:

- Private Psychiatrist referral for CATT and inpatient admission

  Private psychiatrist will contact PTS regarding accessing an inpatient bed, PTS clinician will:

  - Collect all clinical information, triage and search SMR, EMR and CMI

  - Mobilise the case to the relevant CATT team

  - Send an 'information only' report to the MHP Bed manager

  The receiving CATT team will respond to the referral, contact the patient and treating private psychiatrist as required and communicate with the MHP Bed Manager about the ongoing need for an inpatient bed.

- Green Light Priority Access Criteria for Paediatrician Referrals

  Criteria:

  - Child living in Dandenong/Springvale, Casey/Cardinia, Frankston/Peninsula Areas

  - Complex mental health needs (or has acute risk of suicide or psychosis)

  - Has not responded to other interventions, or too complex for other interventions

  Refer via telephone or referral letter to Psychiatric Triage Service (PTS) Phone 1300 369 012

- Sandringham Emergency Department request for assessment

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Sandringham Emergency Department does not have an emergency psychiatric service, therefore their process is to call the Area Mental Health Service to which the client resides to organise an assessment.

On receipt of phone call, the PTS clinician will conduct triage of client as requested and confirm that address is within the Monash Health catchment. If client does not reside within Monash Health catchment area, then PTS to advise referrer to contact the appropriate Area Mental Health Service Triage.

If client resides within Monash Health catchment:

o   If client is assessed as being appropriate for community treatment, then PTS would recommend client be discharged to appropriate community follow up. PTS to arrange follow up as appropriate as per Triage Rating Scale.

o   If client is assessed as being not appropriate for discharge from the ED then PTS is to recommend that client be transported via ambulance to MMC Emergency Department for a comprehensive psychiatric assessment. PTS to advise Clayton EPS of pending presentation and forward information gathered regarding assessment.

DIRECT ACCESS

Emergency Psychiatric Services (EPS)

The EPS team will review patients who have been triaged by the ED triage nurse as requiring mental health assessment. The process undertaken by EPS on receiving a referral is outlined in the Mental Health patient Assessment, treatment, transfer and discharge by ED procedure.

EXTERNAL DIRECT ACCESS TO OTHER SPECIFIC TEAMS

PACER

PACER is a service offering mental health assessment to those who Police assess as requiring urgent mental health input and those that would otherwise be transferred to ED via Section 351 MHWA 2022. Only Police can initiate a referral to PACER. Where a medical concern is also identified, Ambulance Victoria will be called to attend.

The PACER clinician will:

- Receive a referral via Vic Police and where possible review background/history via CMI, EMR, SMR, PTS or Police data base
- Attend location of the patient with Police and offer a mental health assessment, gather collateral from NOK, Family and Carer, and formulate a management plan.
- Communicate appropriate outcome with the consumer/patient and/or referral source.

- Ensure an appropriate medical assessment is undertaken and documented prior to transfer or discharge.Document and record the mental health assessment and outcome actions in SMR patient records. Where a patient/consumer requires direct admission to an inpatient unit and documentation in SMR is unable to be completed prior to arrival on the unit, documentation will occur immediately following verbal handover of the patient /consumer and prior to the PACER clinician leaving the unit.

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Consultation Liaison

This service is provided on all wards across all Monash Health sites.

All patients admitted into Monash medical beds who present with mental health needs can be referred to The CL team at each of the main hospital sites. Generally, every referral is reviewed by Consultant, JMO and CL Nurse to support treatment and recovery. Mental Health admissions can be facilitated via the CL team.

- Referrals are made on EMR via orders, a phone call or page allowing discussion/clarification between clinicians is welcomed. Contact the CL Team directly by phone or page for urgent referrals.
- Referrals to CL from within the Mental Health Program – Not uncommonly, a patient who may be receiving treatment from a community mental health team or an inpatient unit may be transferred from the mental health setting to a medical setting due to physical health concerns. Referrals (and handover) must be made completed via email and contact number/pager to discuss the referral as per Clinical handover forms Mental Health implementation tool.

Referral Process by site

Site	Place referral on EMR	Call or page CL Team to discuss referral	After Hours
Casey Hospital	Adult CL	Pager #2484 Mobile 0437 459 471 clpsych@monashhealth.org	Casey AH Psych Reg via Switch
	Paediatric CL	Pager #4638 Mobile 0404 805 762 paedcl@monashhealth.org	
Dandenong Hospital	Adult	Mobile 0404 490 854 Dandenong_clpsych@monashhealth.org	Dandenong AH Psych Reg via Switch
	Paediatric CL	Pager #4638 Mobile 0404 805 762 paedcl@monashhealth.org	
Kingston Hospital	Adult CL	Contact Consultant 0410 461 619 Or Via APMH 9265 1750	Consultant on call for Aged Psychiatry
Monash Hospital Clayton (including Monash Children's Hospital	Adult CL	Pager #520 RN Pager #4271/72 Reg Clayton_clpsych@monashhealth.org	Clayton AH Psych Reg via Switch
	Paediatric CL	Pager #4638 Mobile 0404 805 762 paedcl@monashhealth.org	

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Moorabbin Hospital	Adult CL (Clayton)	Pager #520 RN Pager #4271/72 Reg Clayton_clpsych@monashhealth.org	Clayton AH Psych Reg via Switch

Referral Considerations

When discussing referrals please consider the following:
- What is the mental health concern?
- Is there a specific referral question?
- Is there an acute psychiatric risk?
- Is the patient under the Mental Health & Wellbeing Act 2022?
- Has the Patient consented to the referral? If not, do they meet criteria for the Mental Health & Wellbeing Act 2022?
- Urgency of the referral.

Gender Clinic

The Gender Clinic is a state-wide service

- Clinic operates on Mondays to Fridays 9-5pm

- Contact details are: Phone (03) 9556 5216; Fax (03) 9556 5256.

- Requires a referral from a general practitioner through a centralised intake process page: https://monashhealth.org/health-professionals/referrals/. Referrals by fax or email are not accepted

- On receipt of the referral:

  o Client will be added to waitlist

  o Approximately 4 to 8 weeks after referral, client will receive an intake call assessment by the social worker

  o Once added to the waitlist, the client will receive a monthly text message advising them that they are still on the waitlist

Early in Life Mental Health Service

Perinatal and Infant Inpatient Unit

- Planned admissions are facilitated through the NM and the consultant of the unit via Tel (03) 9594 1414. For crisis and after hour admissions, the ANM and the consultant on call facilitate the admission

Oasis

- For planned admissions from the community through the senior clinician on the unit via Tel (03) 8572 4693, referral discussed with NM and consultant of the ward

- Crisis admission and after hours, a discussion with ANM/NIC and consultant on call will need to occur via Tel (03) 8572 4693.

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Stepping Stones

- Admissions to Stepping Stones can occur after a mental health assessment has been completed by EPS or an external service

- Contact Stepping Stones Bed Coordinator on 0418 726 387 between 8am to 4:30pm Monday to Friday or via the Stepping Stones staff station 8572 3183 afterhours or weekends.

ELMHS Service Agreements

- An agreement between Headspace and ELMHS regarding rapid re-entry

- When a client has been discharged from ELMHS to Headspace, the client presents with a deterioration in mental state or other concerning behaviour, Headspace can directly contact

  iACT to discuss these concerns. If iACT indicate the client must be referred back to ELMHS, they will ask Headspace to contact PTS to initiate a rapid re-entry into the ELMHS service.

South Eastern Alcohol and Drug Services (SEADS)

- Single point of contact for all clients and referring organisations 1800 14 25 36

- Contact is made with SEADS either by telephone, self-presentation at service centres or via internal referral from another service area

- An initial screening assessment is undertaken to determine the most appropriate service area and priority of access.

Refugee Health and Wellbeing

Monash Health Refugee Health and Wellbeing provides a psychiatry service for adults aged 25 -65 years, presenting with a range of mental health issues, including a history of trauma / torture, Depression, Anxiety, Complex grief and loss.

The Service is also available to provide primary, secondary and tertiary consultation to the region including, SRSs, health practitioners and other mental health service providers.

- Refugee Triage Nurse (03) 9792 8100

- The triage nurse will contact the patient to organise an assessment to establish needs

Transitional Support Unit (TSU)

This is a state wide community based residential rehabilitation service for consumers with a Dual Disability. This services operates 24/7

- All enquiries and referrals can be discussed with a clinician during business hours, Monday to Friday, 8:30-5pm, via Telephone 03 8572 5052
- Following discussion with a clinician, if the consumer meets eligibility critieria, a referral form will be emailed to the referrer
- All enquiries and referrals are documented within the local database and discussed at the TSU intake/assessment meetings every 2 weeks

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Wellness and Recovery (WRC) – Eating Disorders

WRC has a centralised intake service.

- To initiate a referral to any part of the WRC service (Inpatient, day program and/or outpatient services) the WRC Referral Form needs to be completed by the client's referring GP along with the requested bloods (see https://monashhealth.org/services/eating-disorders/)
- Once a completed referral is received the intake team will review and then triage for the next available assessment appointment.
- Admin staff will book the appointment and send an appointment letter to the client and a copy to the referring GP.

Forensic Services

Mental Health Forensic Assessment and Consultation Team (MHFACT)

MHFACT receives referrals from the Victorian Fixated Threat Assessment Centre (VFTAC) of individuals who are identified as moderate to high concern of grievance fuelled violence and requiring mental health supports.

- Referrals from VFTAC for individuals within Monash Health catchment who require an acute response will be made to PTS. VFTAC will in addition contact MHFACT to notify them of the referral to support the acute response.
- Referrals from VFTAC for individuals who do not require an acute response will be made directly to MHFACT.
- Referrals from Monash Health to VFTAC are to be made directly to MHFACT. MHFACT will triage these referrals in consultation with VFTAC. For more information see Mental Health - Managing referrals received from Forensic Services (including Prison) procedure

Forensic Clinical Specialist Program

The Forensic Clinical Specialist Program (FCSP) provide:

- Liaison and advice in respect of forensic consumers transitioning into our catchment area requiring ongoing treatment
- Support and advice to treating teams within Monash Mental Health Service, regarding consumers with a forensic history and who may be at risk of (re)offending.

Referrals to MHFACT and FCSP can be made by completing the referral form

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QUICK REFERENCE GUIDE


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                    ┌──────────────┐
                    │ ELMHS - iACT │
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                    │     CATT     │
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                    │  Forensic    │
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                    │Outside of    │      │During business hours│
                    │business hours│──────│- Contact Aged       │
                    │- Aged Persons│      │Persons Mental Health│
                    │Mental Health │      │Triage via 9265 1750 │
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Direct Access	EPS via ED
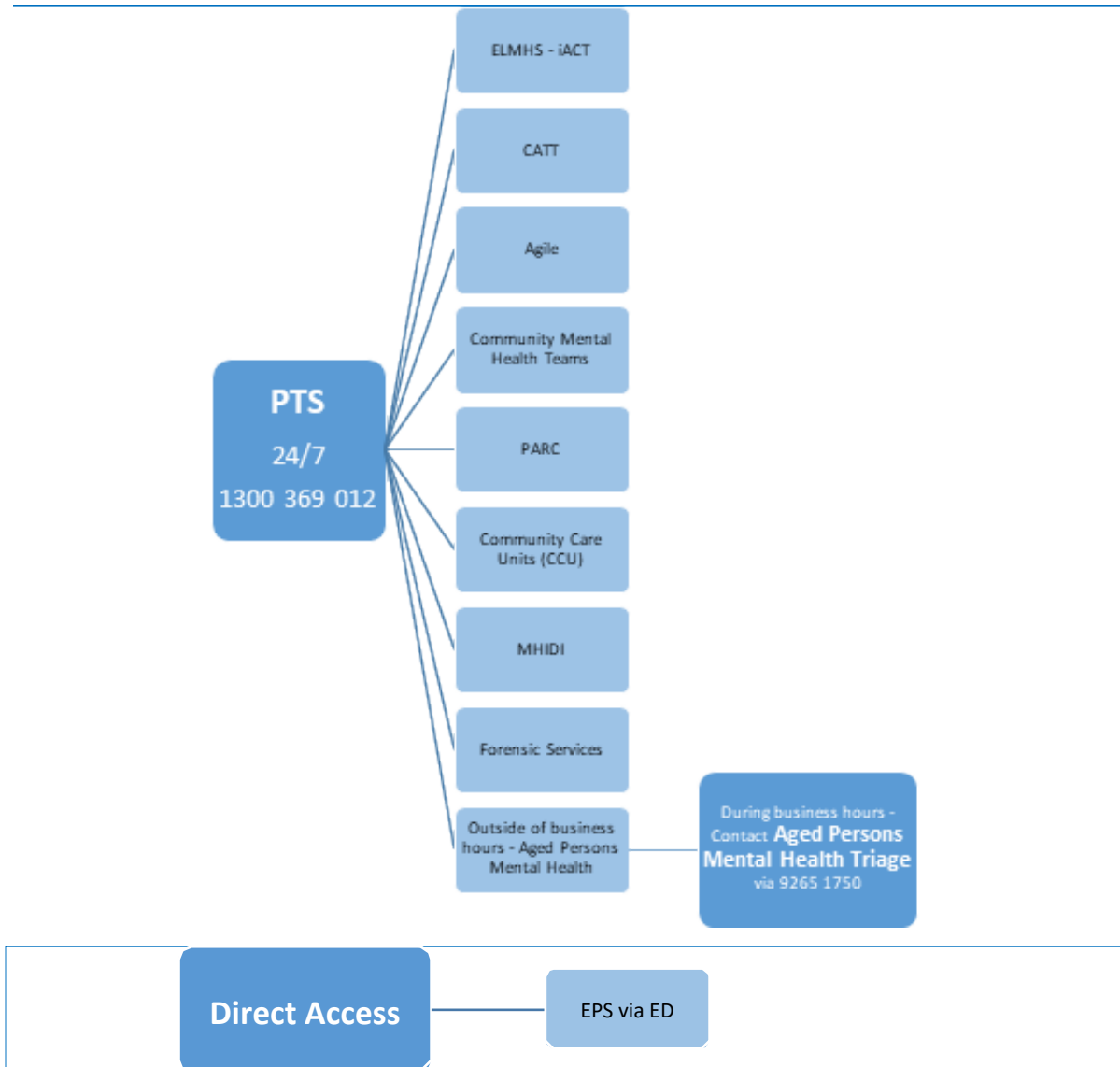
External Direct Access	PACER
	Consultant Liaison
	Gender Clinic - https://monashhealth.org/services/gender-clinic/
	Early in Life Mental Health Service
	South Eastern Alcohol and Drug Services (SEADS) - https://monashhealth.org/services/mental-health/south-east-alcohol-and-drug-services/
	Refugee Health and Wellbeing - https://monashhealth.org/services/refugee-health-and-wellbeing/
	Transitional Support Unit (TSU)
	Wellness & Recovery – Eating Disorders - https://monashhealth.org/services/eating-disorders/
	Forensic Services - VFTAC

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KEY STANDARDS, GUIDELINES OR LEGISLATION

Family violence operational policy

Clinical handover patient discharge or transfer Mental Health procedure

Clinical handover forms Mental Health implementation tool

Mental Health patient Assessment, treatment, transfer and discharge by ED

Mental Health – Managing referrals received from Forensic Services (including Prison) procedure

Triage Scale Mental Health Services Guidelines

KEYWORDS

Screening, referrals, Access, Mental Health

Document Governance	
Supporting Policy	High Quality Care (Policy)
Executive Sponsor	Chief Operating Officer
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This Procedure has been endorsed by an EMR Subject Matter Expert (SME)	There are no Order Set or Quick Reference Guides linked

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