

Specialist mental health service components

The specialist public mental health system consists of clinical services and psychiatric disability rehabilitation and support services (PDRSS). Clinical mental health services are managed by public hospitals and provide assessment, diagnosis, treatment and clinical case management to people with a serious mental illness. Psychiatric disability rehabilitation and support services are provided by non-government community organisations.

Specialist clinical mental health services in Victoria are provided on an area basis, and are often referred to as area mental health services (AMHS). They include adult mental health services, child and adolescent mental health services, and aged persons mental health services. Each of these service categories provides inpatient psychiatric services, in addition to a range of residential and other community-based services.

Adult specialist mental health services (16-64 years)

Target group

Adult specialist mental health services are aimed primarily at people with serious mental illness or mental disorder who have associated significant levels of disturbance and psychosocial disability due to their illness or disorder. Commonly these will be people with a diagnosis of a major mental illness, such as schizophrenia or bipolar disorder, but will also include some people with other conditions such as severe personality disorder, severe anxiety disorder, or those who present in situational crisis that may lead to self-harm or inappropriate behaviour towards others. The distinguishing factor is the level of severity of the disturbance and impairment. Increasingly, adult mental health service consumers have more than one disorder, with drug and alcohol related disorders (dual diagnosis) being most prevalent.

Service components

All specialist mental health services are required to provide a range of components so that consumers have access to similar service responses and functions wherever they live. However the health services and hospitals deliver their public specialist mental health services differently depending on the local service environment and catchment area. Some services have separate teams for each component function; others operate 'integrated teams' which perform a number of functions by rostering staff to undertake the required activities for a given period. The critical factor is that all area mental health services provide the full range of functions.

Specialist services are usually provided on a regional or statewide basis.

Crisis assessment and treatment (CAT) services

These services operate 24 hours a day and provide urgent community-based assessment and short-term treatment interventions to people in psychiatric crisis. CAT services have a key role in deciding the most appropriate treatment option and in screening all potential inpatient admissions. CAT services provide intensive community treatment and support, often in the person's own home, during the acute phase of illness as an alternative to hospitalisation. CAT services also provide a service to designated hospital emergency departments through an onsite presence.

Mobile support and treatment services (MSTS)

These services provide intensive long-term support to people with prolonged and severe mental illness and associated high-level disability. They utilise an assertive outreach approach and operate extended hours seven days a week. MSTS's differ from continuing care services in the frequency and intensity of intervention offered and work more closely with psychiatric disability rehabilitation and support services.

Continuing care services

These are the largest component of adult community based services. These services provide non-urgent assessments, treatment, case management, support and continuing care services to people with a mental illness in the community. The length of time case management services are provided to a person varies according to clinical need. Continuing care services may be involved with people for extended periods of time or may provide more episodic care. Continuing care clinicians frequently liaise with, and refer to, generalist services including general practitioners for ongoing support and provision of services to people with a mental illness.

Primary mental health and early intervention teams (PMHEI)

These teams support and enhance the capacity of primary care providers, especially general practitioners and community health services, to recognise and respond to mental disorders more effectively. They provide consultation, liaison, education and training services to primary care providers for both low and high prevalence disorders. The teams have a particular focus on disorders such as depression and anxiety, and also provide some short-term direct care treatment and assessment for these high prevalence disorders.

Community care units

Community care units provide medium to long-term accommodation, clinical care and rehabilitation services for people with a serious mental illness and psychosocial disability. Located in residential areas, they provide a 'home like' environment where people can learn or re-learn everyday skills necessary for successful community living. While it is envisaged that people will move through these units to other community residential options, some consumers require this level of support and supervision for a number of years.

Acute inpatient services

These services provide voluntary and involuntary short-term inpatient management and treatment during an acute phase of mental illness, until the person has recovered enough to be treated effectively and safely in the community. These units are located within acute general hospitals. People admitted to an inpatient unit from the community are usually assessed by a CAT service to see if a less restrictive option is possible.

Secure extended care inpatient services

These services provide medium to long-term inpatient treatment and rehabilitation for consumers who have unremitting and severe symptoms of mental illness, together with associated significant disturbance, that inhibit their capacity to live in the community. These services are provided on a regional basis, and are gazetted to take involuntary consumers. They are typically located on hospital sites with acute mental health units or other extended care bed based services. They represent the highest level of care on the continuum of mental health services and provide extended clinical treatment, supervision and support.

Homeless outreach services

Homeless outreach psychiatric services (HOPS) provide a specialist clinical and treatment response for people who do not engage readily with mental health services. HOPS work in partnership with homelessness services and use assertive outreach to locate and engage with their clients to create a pathway out of homelessness by providing early and appropriate treatment. HOPS link clients into the mental health service system, including access to long-term housing augmented with outreach support, and improve the coordination and working relationships between mental health and homelessness services. HOPS also provide assessment and secondary consultation to homelessness services and other mental health workers. HOPS are not currently available in all catchment areas.

Consultation and liaison services

Consultation and liaison psychiatry is the diagnosis, treatment and prevention of psychiatric morbidity among physically ill patients who are patients of an acute general hospital. This includes the provision of psychiatric assessment, consultation, liaison and education services to non-psychiatric health professionals and their clients/patients. This service is not currently available in all general hospitals.

Prevention and recovery care services (PARC)

PARC services are a new supported residential service for people experiencing a significant mental health problem but who do not need or no longer require a hospital admission. In the continuum of care, they sit between adult acute psychiatric inpatient units and a client's usual place of residence. PARC aims to assist in averting acute inpatient admissions and facilitate earlier discharge from inpatient units. They are not a substitute for an inpatient admission, rather they provide clinical treatment and short-term residential support. PARC services are usually a partnership between PDRSS and clinical services. PARCs are not currently available in all catchment areas.

Youth program – Early psychosis services

Early psychosis services focus on providing service to young people between 16-25 who are experiencing a first episode of psychosis. They aim to provide for earlier and more intensive treatment as well as minimising disability associated with psychosis, including the impact of distress/trauma on both the young person and their family. These services are sub-specialty programs within the specialist clinical adult area mental health service, with close links to child and adolescent mental health services, primary care services and other community services and organisations. Early psychosis services are not currently available in all catchment areas.

Child and adolescent mental health services (0-18 years)

Target population

Specialist child and adolescent mental health services are provided for children and adolescents up to the age of 18 years with serious emotional disturbance. This includes young people with a diagnosable psychiatric disorder whose condition is considered seriously detrimental to their growth or development and/or where there are substantial difficulties in the person's social or family environment. Emotional disturbance in childhood and adolescence may present in a variety of ways. While symptoms may include impaired reality testing, hallucinations, depression and suicidal behaviour, emotional disturbance in childhood presents more often in other ways. Hyperactivity, nightmares, fearfulness, bed-wetting, language problems, refusal to attend school, and stealing are among the behaviours that may indicate distress or disturbance. Young people from 16 to 18 years of age may receive a service from either child and adolescent mental health services or adult area mental health services depending on their needs.

Service components

Intensive mobile youth outreach services (IMYOS)

IMYOS provide intensive outreach mental health case management and support to adolescents who display substantial and prolonged psychological disturbance, and have complex needs that may include challenging, at risk and suicidal behaviours. These services work with young people who have been difficult to engage using less intensive treatment approaches.

Continuing care, clinical

These teams provide a range of services starting with initial intake to provide advice, information and screening. They undertake assessment and treatment of children and adolescents experiencing significant psychological distress and/or mental illness and their families. Services include crisis assessment, case management, multi-modal treatments, individual, family and group therapy and parent or carer support. They also provide consultancy services to other community agencies and

service providers. Child and adolescent mental health services work extensively with other service sectors including schools, general practitioners, paediatricians, youth and family services, child protection and welfare agencies.

Acute inpatient services

These services provide short-term assessment and/or inpatient treatment for children and adolescents who have a severe emotional disturbance that cannot be assessed satisfactorily or treated safely and effectively within the community. They are usually located with general hospitals. Links with metropolitan inpatient services exist for the admission of consumers from rural services.

Day programs

Child and adolescent mental health services' adolescent day programs offer an integrated therapeutic and educational program for young people with behavioural difficulties; emotional problems such as severe depression and/or anxiety; emerging personality difficulties or a severe mental illness such as early psychosis. Issues such as relationship and/or social difficulties and non-attendance of an educational or vocational setting are addressed through intensive group therapy. These programs are not currently available in all catchment areas.

Conduct disorder programs

Conduct disorder is the most severe type of disruptive behaviour in children and young people, with such behaviours as extreme aggression, truancy, lying, stealing, lack of empathy, or running away. Programs offering multilevel early intervention and prevention designed to reduce the prevalence and impact of conduct disorder are currently being piloted in Victoria, and are not currently available in all catchment areas.

Aged persons mental health services (65 years+)

Target group

Aged persons mental health services are primarily for people with a long-standing mental illness who are now over 65 years of age, or who have developed functional illnesses such as depression and psychosis in later life. They also provide services for people with psychiatric or severe behavioural difficulties associated with organic disorders such as dementia.

Service components

Aged persons mental health teams

These services provide community-based assessment, treatment, rehabilitation and case management for older people. The service is delivered through multidisciplinary teams. They provide specialist expertise in medical assessment and treatment, psychological, behavioural, social and functional assessments and a corresponding range of therapeutic interventions. The teams also provide education for consumers and carers as well as consultation to other service providers.

Acute inpatient services

These services provide short-term inpatient management and treatment during an acute phase of mental illness until sufficient recovery allows the person to be treated effectively in the community. These services are located with other aged care facilities and/or general hospitals. In some rural services, aged acute inpatient beds are co-located with an adult inpatient unit.

Aged persons mental health residential (APMH) care

These services provide a range of specialist bed-based services to consumers who cannot be managed in mainstream aged care residential services due to their level of persistent cognitive, emotional or behavioural disturbance. APMH nursing homes and hostels specialise in caring for older persons with a mental illness and provide longer-term accommodation, ongoing assessment, treatment and rehabilitation. They are designed to have a familiar, homelike atmosphere, and residents are encouraged to participate in a range of quality of life activities. Consumers may remain in these units for lengthy periods but opportunities are sought where possible to achieve discharge to a less restrictive environment such as a generic nursing home.

Non-clinical specialist mental health services

Psychiatric disability rehabilitation and support services (PDRSS)

The non-government psychiatric disability rehabilitation and support services sector is a core component of specialist mental health services complementing clinical mental health services. PDRSS are managed by non-government organisations and focus on addressing the impact of mental illness on a person's daily activities and the social disadvantage resulting from illness. They work within a recovery and empowerment model to maximise people's opportunities to live successfully in the community.

Target group

Psychiatric disability support services are aimed at people with serious mental illness and associated significant psychiatric disability. Services cater primarily for people aged between 16 and 64 years. The precise eligibility criteria will depend on the type of service or program being offered. Consumers receiving case management services from the public mental health service who are referred by the service are automatically eligible for support from the PDRSS.

Service components

Psychosocial rehabilitation day programs and home based outreach

Rehabilitation day programs assist people with severe psychiatric disabilities to improve their quality of life, participate in everyday living activities, and function as independently as possible in the community. This may involve the development of social and living skills in a group context, through centre-based and community access programs. Home based outreach services provide support to consumers living in their own homes, or other community residential settings. Training in social and living skills is provided in the resident's home, with a focus on the activities and interactions of everyday life.

Residential rehabilitation

Residential rehabilitation services provide intensive psychosocial rehabilitation and support in group accommodation preparatory to residents living independently in their own setting. Emphasis is on developing or regaining skills to enable each resident to deal with daily living activities, developing confidence to commence or continue schooling, training or employment, as well as supporting positive contact with their family and friends.

Planned respite

These services provide a short-term change in environment for a consumer and a break for carers, and include both formal and informal psychosocial rehabilitation components. Planned respite services may involve social and recreational day activities, including in-home support, holiday and adventure activities, and residential components.

Mutual support and self help

These services provide information and peer support to people with a mental illness and/or their carers. This can involve the sharing of experiences and coping strategies, the provision of information and referral services, and the promotion of community awareness.

Statewide and specialist services

In addition to the local area services, a number of specialist services are delivered on a statewide basis. These services offer an additional level of expertise or service response for people with particular clinical conditions or high level needs. It is important for the area services to be aware of what the specialist services offer, as some consumers will benefit from their input. Statewide services include:

Victorian Institute of Forensic Mental Health (Forensicare)

Forensicare provides a range of services to mentally disordered offenders. These include secure hospital inpatient services at Thomas Embling Hospital and community based services. Forensicare also provides specialist assessment and treatment for mentally ill prisoners, and an on site assessment and advice court liaison service to some Magistrates' Courts to assist in the identification and management of people in these settings.

Personality disorder service (Spectrum)

Spectrum provides consultation, training, treatment and research in relation to people with severe and borderline personality disorder who are at risk of serious self-harm or suicide. Spectrum works closely with area mental health services and clinicians to support their work and develop their skills in providing a more effective response.

Brain disorders service

The brain disorders program provides services to adults with acquired brain injury or neurodegenerative conditions with associated psychiatric disorder. The program has a range of inpatient, residential and community oriented programs, including outreach services and secondary consultation.

Mother-baby services

Specialist mother and baby services provide for the admission of mothers with a mental illness with their baby, in addition to associated community and multidisciplinary services. Services are available at Austin Health, Southern Health, and Mercy Health.

Eating disorder services

Specialist inpatient and community based services for people with eating disorders are available at Austin Health, Southern Health, and Melbourne Health.

Koori services

A number of services to support Kooris are provided throughout Victoria. These include Koori Mental Health Liaison Workers in rural Victoria to assist rural clinical mental health services provide culturally appropriate services, assist with policy development and liaison and provide practical support to Aboriginal people attending these services. In addition, the Victorian Aboriginal Health Service (VAHS) provides a number of mental health and counselling services for the Indigenous community in Victoria.

Child inpatient unit

The statewide child inpatient unit is a 12-bed service located on campus at the Austin and Repatriation Medical Centre in Heidelberg providing admission for children up to 12 years of age and, where appropriate, their families. The unit also provides consultation to, and assessment of, referrals from child and adolescent mental health services across the state.

Dual disability service

The Victorian Dual Disability Service, auspiced by St Vincent's Hospital, provides consultation and education and training to specialist clinical mental health services in relation to people with both intellectual disability and mental illness.

Neuropsychiatric service

This is a statewide specialist service located at the Royal Melbourne Hospital. It is a specialist eight-bed inpatient service that offers assessment, short-term admission and treatment in relation to neuropsychiatric disorders.

Early Psychosis Prevention and Intervention Centre, Statewide (EPPIC Statewide)

The statewide component of EPPIC supports other specialist mental health services across the state to achieve best practice in first onset psychosis through consultation, education and training and the provision of key resources. (EPPIC Statewide is part of Orygen Youth Health, an early psychosis program operating in the western and north western suburbs of Melbourne).

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