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| Mental Health Bulletin 73 |
| Homelessness Youth Dual Diagnosis Initiative (HYDDI) |
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## Purpose and Scope

* To outline mental health data reporting requirements for Homelessness Youth Dual Diagnosis Initiative.
* To provide further information to that contained in the Homeless Youth Dual Diagnosis Initiative Guidelines, March 2022, regarding the recording of contact data for HYDDI clinicians.

## Overview

HYDDI was established in 2010 and funded through the National Partnership Agreement on Homelessness (NPAH). The NPAH was replaced by the National Housing & Homelessness Agreement (NHHA) on 1 July 2019. From 1 July 2019, homelessness programs previously funded through the NPAH, including HYDDI have been funded recurrently.

The core aim of HYDDI is to support the capacity building of Youth Specialist Homelessness Services (YSHS) providers to work with young people experiencing homelessness who have mental health and/or substance related issues.

The HYDDI role requires the Senior Clinician to be able to work with a high degree of autonomy, spend the majority of their working time onsite at YSHS service sites and have support of a clinical team within the AMHS.

The HYDDI role includes:

* + Capacity building/service navigation provided to YSHS providers
	+ Secondary consultations provided to YSHS practitioners or AMHS clinicians
	+ Direct treatment provided to young people whose needs are not being met by mental health services, or by other services
	+ Liaison between YSHS and AMHS.

Below are the funded health services and the partner housing organisations:

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| **Area** | **Clinical Mental Health Youth Services** | **Youth Homelessness Providers** |
| **NW metro**:North West,Inner West, Northern, Mid-West, North East, South West | Melbourne Health | Hope Street Youth & FamilyMelbourne City Missions |
| **Southern:**DandenongMiddle SouthInner South EastPeninsula | Monash Health  | MOIRA |
| **Eastern**:Central EastOuter EastInner East | Eastern Health | Family Access Network |
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| **Gippsland** | Latrobe Health  | Uniting Gippsland |
| **Grampians** | Grampians Health  | Ballarat Community Health |
| **Loddon Mallee:**Northern MalleeLoddon | Mildura Hospital | MASP |
| **Barwon South Western:**BarwonGlenelg | Barwon Health Services | Barwon Child Youth & Family |
| **Hume:**GoulburnNorth East Hume | Goulburn Valley Health  | SalvoCare Brayton Youth Refuge |

## Activity Data Reporting

### Specialty service development

**Note:** HYDDI clinicians are now able to record community contact type of “Specialty MH Service Development” (Code 6) as they are being funded to build an AMHS capacity to provide mental health support to a specific target population.

### Subcentre / Program

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| **PROGRAM** |
| **Description** | **Classification** | **Program Type** | **Target Population** | **Fund Source** | **Start Date** | **OM Setting** |
| Must include HYDDI as part of name | Community | Comm, Dual Diagnosis | Homeless Youth | Dual Diagnosis | When your program commenced | Yes |

## New & Existing HYDDI Services:

* HYDDI programs targeted at consumers under 18 years of age must be linked to a youth subcentre, where the youth outcome measure setting is enabled.
* HYDDI programs targeted at consumers over 18 years of age must be linked to an adult subcentre, where the adult outcome measures setting is enabled
* Services may create a new subcentre, or link to an existing subcentre

## Further information

# Further information about the correct use of CMI/ODS can be found on the Victorian Government’s website. In particular, see the sections on; Registration of Clients, CMI/ODS Service Contacts and Subcentre/Program Maintenance. <https://www.health.vic.gov.au/research-and-reporting/bulletins-and-program-management-circulars-pmc>

# For any queries relating to data reporting or program setup please email: MHDReporting@health.vic.gov.au

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