Mental health services

CSCF v3.2



Module overview

Please note: This module must be read in conjunction with the Fundamentals of the Framework (including glossary and acronym list).

The Mental Health Services module represents a range of mental health services for people in Queensland. Mental health is a specialist area of healthcare promoting optimal quality of life for people with mental disorders or mental health problems. Mental health services are concerned with the assessment, diagnosis, monitoring and treatment of people who have a mental illness or disorder characterised by a clinically significant disturbance of thought, mood, perception, memory and/or behaviour. Fundamental principles underpinning effective mental health services involve consumer-centeredness, family/carer involvement and recovery planning.

Mental health services address the needs of a broad mix of patient types across the entire age spectrum (children, adolescents, adults and older persons). A person's need for mental health services can be short, medium, long term or intermittent, and often spans various levels of care and service areas across the health continuum. Authorised mental health services (AMHS) under the *Mental Health Act 2016* are listed on the Queensland Health internet site at https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/clinical-staff/mental-health/services/default.asp

The delivery of mental health services routinely considers and responds to the special needs that may be associated with the mental health of:

- Aboriginal and Torres Strait Islander peoples
- people of culturally and linguistically diverse backgrounds
- people living in rural and remote areas
- people in out-of-home care
- people with a comorbidity or complex needs—this may include, but is not restricted to, people with a mental health diagnosis as well as:
 - an intellectual disability
 - a substance-use disorder
 - a dementing illness or other brain disorder/s
 - severe or complex medical problems



- a sensory impairment
- a forensic history.

For the purpose of this module, the term:

- dedicated pharmacy service refers to a pharmacy that is either based on the hospital
 campus or is a nominated pharmacy in the community with which a service agreement
 has been established for the delivery of mental health pharmacy services, with these
 services delivered according to requirements outlined in the Australian Council on
 Healthcare Standards
- extended-hours refers to hours of service provided outside of business hours and are determined by the service
- psychogeriatric refers to older persons mental health services which may include dementia services
- **qualification** refers to either formal qualification/s from a higher education institution such as a university, at either under-graduate or post-graduate level, or informal qualification/s obtained as part of ongoing professional development, employer-based in-service program, or a College / Professional Association.

By national convention, the accepted term used when referring to a mental health patient is **consumer**, with consumers supported by their family and/or carers. However, on occasion the terms **patient**, **people** and **person** have been used in the module to maintain consistency with other modules.

The Mental Health Services module consists of four sections as described in Table 1:

Section 1: Adult Services

Section 2: Child and Youth Services

Section 3: Older Persons Services

Section 4: Statewide and Other Targeted Services.

Table 1: Mental health services defined in the CSCF

Service section	Service subsections	Service subsection notes
1. Adult Services	1.1 Ambulatory Services	Levels 1–6, including services delivered by Continuing Care Teams, Mobile Intensive Treatment Teams and community-based Acute Care Teams Levels 1–6, including services delivered by Continuing Care Teams, Mobile Intensive Treatment Teams and community-based Acute Care Teams
	1.2 Acute Inpatient Services	Levels 2–6. Private sector commences at Level 3 for non-ablative neurosurgical procedures only, otherwise commences at Level 4

	rvice ction	Service subsections	Service subsection notes
		1.3 Non-Acute Inpatient Services	Levels 4–6, including criteria for Community Care Units, Secure Mental Health Rehabilitation Units, and Acquired Brain Injury and Mental Health Units
2.	Child and Youth	2.1 Ambulatory Services	Levels 1–6
	Services	2.2 Acute Inpatient Services	Levels 2-6
		2.3 Non-Acute Inpatient Services	Level 5
3.	Older Persons	3.1 Ambulatory Services	Levels 1–6
	Services	3.2 Acute Inpatient Services	Levels 2–6
4.	Statewide and Other	4.1 Adult Forensic Services	Level 6 (relevant to public sector mental health services only)
	Targeted Services	4.2 Child and Youth Forensic Services	Level 5 (relevant to public sector mental health services only)
		4.3 Deafness and Mental Health Services	Level 6 (relevant to public sector mental health services only)
		4.4 Eating Disorders Services	Level 6
		4.5 Emergency Services	Levels 4–5, including services delivered by hospital-based Acute Care Teams (relevant to public sector mental health services only)
		4.6 Evolve Therapeutic Services	Levels 4–5 (relevant to public sector mental health services only)
		4.7 Homeless Health Outreach Services	Level 5 (relevant to public sector mental health services only)
		4.8 Perinatal and Infant Services	Levels 3-6
		4.9 Transcultural Services	Level 6 (relevant to public sector mental health services only)

Note: Sections held over until next review of CSCF were Older Persons Services, Non-Acute Inpatient Services; and Statewide and Other Targeted Services including Intellectual Disability and Mental Health Services, Consultation-Liaison Mental Health Services, and Early Psychosis Services.

An integrated Queensland mental health service system

A strong focus on the integration of mental health services across Queensland ensures people living with mental illness have access to the right care and support at the appropriate time. The mental health service system offers a range of inter-connected clinical and community service options to ensure an individual's care is coordinated and responds to changing needs over time.

Along the continuum, mental health care may take place in a number of settings, including a general acute unit, a dedicated mental health unit or hospital, a residential program, an institutional facility (e.g. a prison), a community-based setting or in the person's home. All service components within the Queensland mental health service system are integrated and work together to promote continuity of care (Figure 1).

State & Local Government Initiatives

MH Promotion, Prevention & Early Intervention

Primary Health Care

Private Sector

Community Mental Health Staffing

Acute Inpatient & Extended Inpatient Services

Specialised Statewide Mental Health Services

Community Residential

Commonwealth Government Initiatives

Figure 1: Queensland Mental Health Service System¹

Note: Private sector includes acute inpatient and ambulatory mental health services.

Private sector mental health service system

Private sector mental health services recognise people with a mental illness or disorder ideally require access to a comprehensive range of services, with an emphasis on coordination, integration and individualised care.

Care options generally include a comprehensive continuum-of-care model, incorporating multidisciplinary services and care across a range of settings appropriate for the consumer. The full continuum of care ranges from intensive, admitted, overnight treatment to day hospital, outpatient and community care, and 24-hour access to psychiatric emergency care for patients of the private mental health service system.

At all times, admission, treatment and care are under the supervision of the treating psychiatrist, irrespective of the care setting.

Mental health service areas

The Mental Health Services module defines broad service areas separately so detailed definitions can be provided for each specific service area. In line with the framework used for reporting under the National Mental Health Strategy, the service areas are broadly defined as follows:

- Ambulatory mental health services deliver mental health care to non-admitted consumers, including services at hospital outpatient clinics and non-hospital community mental health services, crisis or mobile assessment treatment services, and day programs. Services are streamed according to age groups.
- Acute inpatient mental health services deliver mental health care to admitted consumers, usually on a short- to medium-term and intermittent basis. Services are streamed according to age groups.
- Non-acute inpatient mental health services deliver mental health care to admitted
 consumers over a long-term period and involve a specialist rehabilitation component to
 care. Previously, many of these services have been known as extended treatment/care
 services. Services are streamed according to age groups.
- Statewide and other targeted mental health services deliver a statewide, centrally coordinated mental health service and are defined separately for at least one of the following reasons:
 - they deliver statewide mental health care
 - they provide mental health care across the age spectrum
 - they deliver targeted mental health care programs for nominated populations.

General support services

Documented processes and collaborative partnerships—relevant to the service being provided and individual consumer need—should be established between a mental health service and a range of:

- clinical support services including (but not limited to) registered medical practitioners (general practitioners); health services (acute, non-acute and ambulatory) for the target population; and alcohol, tobacco and other drug agencies
- non-clinical support services including (but not limited to) education, housing, vocational and other appropriate government agencies (e.g. Queensland Police Service) and non-government agencies.

Risk management

In addition to risk management outlined in the Fundamentals of the Framework, there are specific risk management requirements relevant to mental health services. These may include the management of risk behaviours, such as violence or self-harm, or risk issues, such as neglect or maltreatment. As the consumer's assessed level of risk (and/or complexity) increases, a higher level of mental health service capability is required to ensure the safety of those involved.

Risk and complexity are defined in the module using the following parameters, which were adapted from the American Association of Community Psychiatrists (2000)²:

- **Risk of harm** refers to potential to cause significant harm to self or others
- **Functional status** refers to the degree to which social responsibilities, interactions with others, vegetative status and self-care can be managed
- **Comorbidity** refers to complications arising in the context of co-existing medical illness, substance use, intellectual disability or other psychiatric disorder
- Recovery environment refers to environmental factors (including family support) that
 contribute to the onset or maintenance of mental illness or that may support efforts to
 achieve/maintain mental health
- **Treatment and recovery history** refers to recognition of a person's historical experience and its potential to inform the present episode of care
- **Engagement** refers to consideration of the person's understanding of illness and treatment, in addition to their ability or willingness to engage in the treatment and recovery process.

In the application of the American Association of Community Psychiatrists' risk matrix (Table 2), consideration should be given to the consequences, immediacy, magnitude and likelihood of each domain. Risk factors can be categorised as either static, historical factors (e.g. gender, age) or dynamic, changeable factors (e.g. increased stress due to a life event). A range of sources (relevant to the individual case) should be accessed in the assessment of risk, such as the consumer, the consumer's carers and relatives, the Queensland Police Service and the referral source.

Consideration should also be given to the complexity of each presentation or situation. For example, a person presenting with several identified 'low-risk' factors might be more accurately assessed as 'moderate risk' due to the complexity of their situation. As situational complexity increases, it is expected that input from a higher level of service is required.

The risk matrix should be used as a guide and is not intended to replace clinical risk assessments conducted on an individual basis by experienced and qualified mental health clinicians. Furthermore, it is acknowledged this risk matrix does not reflect the risk parameters of all age groups (e.g. infants) and does not necessarily take into account individual special needs or vulnerabilities. Therefore, this risk matrix should be considered as only one component of a suite of risk assessment tools.

Table 2: Risk matrix—a guide to defining risk while using the Mental Health Services module

	Risk of harm	Functional status	Comorbidity	Recovery environment	Treatment and recovery history	Engagement
Low risk Requires only general level of observatio n and/or standard level of care that might focus on monitoring and/or respite.	 No current suicidal, homicidal ideation, plan or intentions Low likelihood for harmful behaviour Ability to care for self with support Intact impulse control 	 Transient impairment in functioning, but able to maintain some meaningful relationships Minor or intermittent disruption/s to usual activities 	Evidence that medical, substance use and/or other psychiatric illnesses or problems have potential to develop, which may affect presenting problem	 Life circumstances predominantly stable At least one source of support available 	Where relevant, prior experience/s with treatment/recove ry been predominantly successful	Potential to understand and accept illness and its effects (with support and psychoeducation)
Moderate risk Requires visual proximity and/or regular	 Current suicidal or homicidal ideation without intent, plan or past history Potential for harmful behaviour 	Becoming conflicted, withdrawn, alienated or troubled in most significant relationships, but maintains control over impulsive or	Medical, substance use and/or other psychiatric illnesses or problems exist that may affect presenting problem and will then require	 Significant discord or difficulties in family or other important relationships Recent important loss or deterioration of 	 Previous or current treatment/recove ry associated with partial remission or control of symptoms Previous treatment/ 	 Some variability in understanding or accepting illness, associated disability and/or comorbidities Limited commitment to change and

	Risk of harm	Functional status	Comorbidity	Recovery environment	Treatment and recovery history	Engagement
clinician contact.	 Evidence of self- neglect Impaired impulse control 	abusive behaviour • Deterioration in ability to fulfil responsibilities (e.g. work/school)	additional intervention and monitoring	personal/materia l circumstances Exposure to danger Pressure to perform surpasses ability to do so in significant area Limited support resources accessible	recovery has required strong professional or peer support in structured settings	accepting responsibility for recovery
High risk Requires one or more clinicians in immediate proximity.	 Current suicidal or homicidal intentions with a plan Episodes of harmful behaviour to self or others, or high likelihood for this to occur Extreme compromise of self-care Markedly impaired impulse control. 	 Extreme deterioration in social interactions with minimal control over impulsive or abusive behaviour Inability to attend to basic personal needs and associated impairment in physical status Complete inability to maintain any 	 Significant medical, substance use and/or other psychiatric illnesses or problems currently exist and require significant monitoring/inter vention Comorbid illnesses or problems place person in additional danger of complications, 	 Serious disruption of family/social milieu or life circumstances Episodes of victimisation or violence Overwhelming demands No support resources accessible. 	 Past or current treatment/recove ry associated with minimal success Symptoms persistent. 	 No understanding or awareness of illness, associated disabilities, or comorbidities Unable to actively engage in treatment Avoidant, frightened or guarded.

Risk	of harm Fu	unctional status	Comorbidity	Recovery environment	Treatment and recovery history	Engagement
		aspect of personal responsibility in usual roles (e.g. parental, citizen, occupational).	and impair potential for recovery from presenting problem.			

Source: Adapted from the American Association of Community Psychiatrists (2000)

The reader should consult other key documents, such as the **Model of Service for Mental Health in Queensland** (public sector specific), to inform their knowledge of the mental health system and, more specifically, to understand clinical processes and workforce roles.

For the purposes of this module, age-specific services are generally categorised as follows:

- Child and Youth Services—0 to 18 years
- Adult Services—over 18 years
- Older Persons Services—65 years and older who meet specific criteria associated with the ageing process and complex mental health needs.

However, there will be some exceptions to these age-range guides, based on factors such as culture, personal background or need, clinical presentation, developmental status or the available service setting. Service managers and providers are required to consider these issues and the relevant site-specific policies and procedures before deciding which section of the module is most relevant to their service provision.

Older persons services must consider the following when planning and coordinating services:

- maintenance of function and the ability to remain at home (if preferred)
- family/carer risk factors, including high rates of morbidity among carers
- access to, and collaboration with, appropriate health and aged-care supports
- medical comorbidity, especially chronic diseases related to ageing
- comorbid cognitive disorders
- sensory impairment
- social isolation
- grief and loss.

Where a health service provides a consumer with both mental health care and general healthcare, the service is required to comply, for instance, with the relevant components of the Children's Services modules (for consumers aged up to 18 years), Medical Services module (for consumers aged over 18 years) and other relevant CSCF modules, in addition to the Mental Health Services module.

Service networks

In addition to what is outlined in the Fundamentals of the Framework, specific service network requirements include:

- services providing mental health care must have documented processes and collaborative working partnerships with government and/or non-government organisations, support agencies and family support services
- documented processes are to be established and maintained between both lower and higher level services of the one service network (e.g. between Level 2 and 5 of acute inpatient services) and across service networks (e.g. across ambulatory and acute inpatient services).

Service requirements

In addition to what is outlined in the Fundamentals of the Framework, specific service requirements, policy and procedure requirements, documented processes, integrated mental health recovery plans, and common elements for inpatient care relevant to all mental health services are detailed below.

Specific service requirements:

- All screening, assessment, treatment and planning tools are age-specific.
- Routine clinical detail collected to inform assessment, diagnosis, intervention and/or recovery.
- Assessments and interventions reflect age-appropriate, evidence-based care.
- Assessments and interventions in Levels 4,5 and 6 services reflect multidisciplinary input.
- Assessments and interventions are associated with a documented case review process, and are conducted in accordance with the National Standards for Mental Health Services and for involuntary consumers, the Mental Health Act 2016.
- · Service delivery reflects specific needs of target population and individual.
- Consumers and family/carers are supported to initiate contact with and engage in all ambulatory, inpatient and community-based mental health, health and support services.
- Consumer's individual educational program is coordinated with and integrated into their inpatient or day program, wherever appropriate.
- Multidisciplinary (and where possible, multisystemic) collaboration for review of all
 care plans in cases where risk status of mental health consumers escalate beyond
 capability of current service level (or in case of emergency mental health
 presentations), including consultation-liaison with higher level mental health service
 (which may be via telehealth facilities).
- Acknowledgement of need for multisystemic input into all mental health care.
- All episodes of care are documented in a health record.
- Consideration of decision-making capacity and/or role of alternate, legally appointed individual or agency in decision-making on behalf of the consumer.
- Working knowledge of processes involving involuntary treatments and consumer rights under the Mental Health Act 2016 as issues may arise concerning ability of children, adolescents and adults to consent to treatment.
- Level 3 to 6 ambulatory services and Level 4 to 6 inpatient services deliver integrated mental health care and ensure continuity of care for those accessing services.
- Level 4 to 6 services conduct audits of effectiveness of clinical and referral pathways.
- Consumers with eating disorders (who are on refeeding program) should be assumed to be at risk of refeeding syndrome and be managed accordingly in an inpatient setting.

For all services caring for children and/or adolescents, including Subsections 4.1, 4.3 and 4.5 of Section 4, Statewide and Other Targeted Services, and occasional adult service, there is a documented process and/or contact with a child protection liaison officer with clear child protection referral processes in place.

- Clinicians delivering Level 6 services represent a critical mass of expertise, and provide statewide leadership and education in specialist mental health clinical management to other service providers.
- Provide relevant clinical indicator data to satisfy accreditation and other statutory reporting obligations.

Current policy and procedure:

- Should explicitly outline care pathways and inform assessment, diagnosis, admission, monitoring, treatment, evaluation, ongoing care, referral, transfer and discharge of mental health consumers.
- Reflect specific needs of target population and individual.
- Inform 24 hours a day response to psychiatric emergencies and high-risk situations.
- Inform management of high-risk behaviour/s and address any (but not be limited to)
 relational, pharmacological, physical and environmental interventions used in
 management and containment of violent and/or self-harm behaviours.
- Inform short-term, high-dependency care and stabilisation of mental health consumers awaiting transfer for inpatient admission.
- Inform identification, prevention, response to and evaluation of adverse clinical events.
- Inform safe administration and ongoing management of consumers receiving
 electroconvulsive therapy (ECT) and non-ablative neurosurgical procedures in services
 authorised by the Mental Health Act 2016 to provide these services, and should inform
 how to manage special needs and/or age-specific needs, and vulnerabilities of
 consumers accessing the service.
- Inform management of non-active consumer cases.
- Inform processes of consultation-liaison between higher level services (Levels 4, 5 and 6) and lower level services.
- Inform refeeding programs used to treat inpatients with eating disorders, and should align/comply with Australian and/or local standards and requirements.
- Inform continuing care of mental health consumers admitted to / discharged from inpatient mental health care.

Documented processes should:

- Demonstrate links and collaborative partnerships with other mental health services (ambulatory, acute inpatient and non-acute inpatient) as is relevant to target population.
- Demonstrate links with local government, non-government organisation/s and other general support services.
- Reflect timely responses and specific needs of individuals.

Integrated mental health recovery plans should include:

- Demonstrate involvement of consumers and carers in planning, operation, monitoring and evaluation of mental health services (Levels 3 to 6).
- Assessments pertaining to each person's family/carer factors, including family/carer risk factors.
- Risk assessments pertaining to each mental health presentation.
- Developmental/educational/vocational tasks relevant to consumers
- Family/carer and community roles in ongoing care and support of the person.

Common elements for inpatient care include:

- Encouragement and support for consumers (in conjunction with their family/carers) to
 participate, when clinically indicated and feasible, in efforts to carry out basic,
 developmentally appropriate activities of daily living during hospitalisation, and some
 other general activities (such as recreational, social and educational/vocational
 activities) may be offered and/or facilitated.
- Provision of services reducing stress related to resuming normal activities in the post-hospitalisation environment (e.g. promoting access to community services associated with ongoing consumer care and mobilising family resources).
- Where the service level capability is stipulated as short-term or intermittent care only, but medium- or long-term care is warranted for any given consumer of that service, ongoing and age-specific consultation-liaison is required with a higher level mental health service.

Workforce requirements

In addition to workforce requirements outlined in the Fundamentals of the Framework, specific workforce requirements include:

- each mental health area/unit/service is staffed according to:
 - occupancy rates
 - current severity of illness experienced by consumers
 - special individual needs
 - age-specific needs and vulnerabilities.
- clinicians within Level 4, 5 and 6 services demonstrate high levels of clinical expertise in assessment, intervention and evaluation of consumers presenting with a dual diagnosis of mental health and substance-use disorders, with ongoing professional development accessed in this area.
- clinicians demonstrate ongoing education and training in clinical and safety programs relevant to the practice of mental health service delivery.
- clinicians providing mental health services participate in clinical practice supervision with clinician/s who are qualified and experienced in mental health.
- clinicians providing mental health services for children, adolescents or older persons
 participate in age-group-specific clinical practice supervision with clinician/s who are
 qualified and experienced in the respective area/s.

clinical practice supervision is required on a case-by-case basis if the clinician's contact
with mental health consumers or with specific groups of mental health consumers, such
as children, is intermittent or limited.

Where relevant to specific service levels:

Medical

- registered medical specialists with credentials in psychiatry demonstrate satisfactory completion of clinical training and possess a Fellowship in Psychiatry recognised by the Royal Australian and New Zealand College of Psychiatrists.
- psychiatry trainees or registrars supervised according to Royal Australian and New Zealand College of Psychiatrists professional documents and guidelines.
- a registered medical specialist with credentials in psychiatry manages the care of consumers receiving ECT in accordance with the *Mental Health Act 2016*.
- a designated medical officer (however titled) accessible 24 hours a day to enact a **Care** and **Treatment Order for a Child** for all child and youth inpatient facilities.

Nursing

• registered nurses have qualifications and/or experience in mental health.

Allied health

• allied health professionals have relevant qualifications.

Other

- interpreter services (e.g. language and sign language) accessible as required.
- access to mental health workforce and/or associated key stakeholders or service providers as required with expertise in:
 - Aboriginal and Torres Strait Islander mental health
 - transcultural mental health
 - dual diagnosis (e.g. mental health disorder plus alcohol/other drug disorder)
 - consumer and carer support needs
- inclusion of Independent Patient Rights Adviser/s (IPRA) as part of the team providing mental health services (public sector services only).

Section 1 Adult Services

Subsection 1.1 – Adult Ambulatory Service

Level 1	Level 2	Level 3	Level 4	Level 5	Level 6
• capable of providing limited should be term or intermitted non-adminental her care to low risk/composition voluntary mental her consumer. • may only available limited how one or general her clinicians provide low community healthcare service not service n	providing short- to medium-term or intermittent non-admitted mental health care to low- risk/complexity voluntary adult mental health consumers. accessible during business hours and may be delivered via hospital-based outpatient clinic, community clinic or home-based care. delivered y e delivered y e delivered predominantly by team of	 capable of providing short-to long-term or intermittent non-admitted mental health care to low- and moderate-risk/complexity voluntary adult mental health consumers. day programs primarily consist of block-based intervention periods and may only be delivered at certain times of the year. delivered predominantly by small team 	• capable of providing short-to long-term or intermittent non-admitted mental health care to low- and moderate-risk/complexity voluntary and, if authorised to do so, involuntary adult mental health consumers (adolescent consumers older than 14 years and older persons—aged 65 and older—may access this service where clinically and	capable of providing short-to long-term or intermittent non-admitted mental health care to low-, moderate- and high-risk/complexity voluntary and involuntary adult mental health consumers (adolescent consumers older than 14 years and older persons—aged 65 and older—may access this service where clinically and	 capable of providing short-to long-term or intermittent non-admitted mental health care to highest risk/complexity voluntary and involuntary adult mental health consumers. may be targeted population with special care needs and may demonstrate most extreme comorbidities and/or indicators of treatment resistance.

- specific to mental health.
- typically, service delivered via community clinic or home-based care.
- service provision typically includes: basic screening and assessment: brief and/or basic assessment and intervention; consumer and carer education: primary care and prevention programs; and referral, where appropriate.
- clinicians and visiting mental health professionals who provide a local community healthcare service (general health clinicians providing mental health service have qualifications and/or experience in mental health care).
- some mental health specific services / programs provided at this level.
- service provision
 typically
 includes:
 assessment;
 interventions,
 including
 counselling;
 consumer and
 carer education
 and information;
 documented

(not necessarily multidisciplinary) of mental health professionals who provide local mental health care service via hospital-based outpatient clinic or day program, community mental health clinic or homebased care.

service provision

typically includes: assessment and targeted interventions by mental health professionals: care coordination / case management; consumer and carer education and information; documented case review: primary and

developmentally appropriate, and in line with policy and procedural documentation of the adult service.

delivered

- predominantly bγ multidisciplinary team of mental health professionals who provide local mental health care service via hospital-based outpatient clinic or day program, community mental health clinic or homebased care.
- service provision typically includes: multidisciplinary assessment and targeted interventions by mental health

- developmentally appropriate, and in line with policy and procedural documentation of the adult service).
- accessible
 during business
 hours and
 consumers have
 access to limited
 extended-hours
 service.
- delivered predominantly by multidisciplinary team of mental health professionals who provide a local mental health care service via hospital-based outpatient clinic. community mental health clinic. homebased care, or designated hospital- or

- accessible during business hours and extended-hours service provided.
- delivered by highly specialised multidisciplinary team of mental health professionals (medical practitioners. psychiatrists, nurses, allied health and other specialists) providing specialist mental health care service either locally and/or across service areas via hospital-based outpatient clinic, community mental health clinic. homebased care or hospital- or community-

limited communitybased day case review: professionals; primary secondary care based day program. program (service prevention coordination / prevention service provision programs; programs; case delivered by includes: consultationconsultationcommunitymanagement; multidisciplinary liaison with liaison with based Acute consumer and assessment and higher level higher level carer education Care Teams and specialised mental health mental health and information; Mobile Intensive interventions by services; and services; and Treatment documented mental health referral, where weekly case referral, where Teams—or their professionals; appropriate. appropriate. review; some equivalents—ma care group programs; v be defined at coordination/ca primary and this level of se management; secondary service). consumer and prevention service provision carer education: programs; documented typically consultationincludes: frequent case liaison with review; targeted multidisciplinary lower and higher group programs; assessment and level mental all levels of targeted health services; interventions by prevention. and referral, mental health where professionals; appropriate. care coordination/ca se management; patient and carer education and information; documented frequent case review; group programs; primary and

secondary prevention programs; consultationliaison with lower and higher level mental health services: and referral, where appropriate. Service As per module As per Level 2, plus: As per Level 4, plus: As per Level 1, plus: As per Level 3, plus: As per Level 5, plus: requirements overview, plus: identification, identification, development of identification, identification, identification. initial acute ongoing comprehensive ongoing ongoing individual initial acute assessment and assessment, assessment, assessment, interventions of mental health assessment and monitoring and monitoring and monitoring and brief mental health interventions of recovery plan interventions of interventions of interventions of problems (that mental health within 1 week of mental health complex mental uncomplicated problems (that problems health problems may be assessment. mental health associated with may be ranging in risk (that may be extensive problems. simple associated with and complexity associated with clinical detail most complex comorbidities comorbidities (that may be forward referrals collected to and/or associated with comorbidities and/or for expert inform resistance to complex and/or resistance to assessment / assessment. comorbidities indicators of treatment). treatment). diagnosis / diagnosis. and/or treatment intervention as range of primary integrated intervention and indicators of resistance). required. prevention identification. recovery. treatment services (e.g. assessment and extensive extensive range development of resistance). clinical detail intervention of stress care plan. of primary (e.g. targeted clinical management). any co-occurring collected to stress basic clinical substance-use programs for inform psychoeducation management) detail collected disorders. individuals / assessment, (including and secondary to inform

- assessment / diagnosis / intervention / recovery.
- limited psychoeducation
- mental health
 assessments /
 interventions
 conducted in
 consultation
 with mental
 health clinician
 where clinically
 indicated, and
 associated with
 documented
 review process.
- mental health
 assessments /
 interventions
 (and referrals to
 other mental
 health services)
 conducted by
 general health
 clinicians of
 service.
- documented processes with Level 5 adult inpatient mental health service.

- information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- mental health
 assessments /
 interventions
 conducted by
 general health
 clinicians with
 qualifications
 and/or
 experience in
 mental health
 and/or visiting
 mental health
 clinicians.

- development of individual mental health recovery plan.
- range of primary
 (e.g. stress
 management)
 and some
 limited
 secondary (e.g.
 weight
 management)
 prevention
 services.
- psychoeducation for consumer and family / carer (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- mental health assessments / interventions conducted by mental health

- (e.g. weight management) prevention services.
- assertive
 outreach
 applicable to
 service and
 target
 population.
- mental health
 assessments /
 interventions
 conducted by
 team of mental
 health
 professionals.
- may be authorised mental health service under Mental Health Act 2016.

- groups / families / carers.
- psychoeducation for consumers, families / carers and groups (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- separate clinical services for families / carers, if required.
- mental health
 assessments /
 interventions
 conducted by
 multidisciplinary
 team of mental
 health
 professionals.
- service based within a HHS or part of service

- diagnosis, intervention and recovery, and broader service delivery across all levels of service.
- extensive range of primary (e.g. stress management), secondary (e.g. weight management) and tertiary (e.g. psychosis treatment maintenance) prevention services.
- statewide clinical forums to assist dissemination of clinical expertise.
- services form part of an integrated mental health service and are based in a HHS or are part of service network

	clinicians of the service. if providing non-ablative neurosurgical procedures, authorised mental health service under Mental Health Act 2016. network that includes Level or 6 adult acut inpatient ment health unit. consultation-liaison services to local health services as required. authorised mental health service under Mental Health Act 2016.	or 6 adult acute inpatient mental health unit. • assertive
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Workforce requirements

As per module overview, plus access to one or more of following (visiting basis or outreach services):

Medical

registered medical practitioner.

Nursing

registered nurse.

Allied health

allied health professionals.

Other

 access to IPRA (public sector only). As per Level 1, plus access to one or more of the following qualified and experienced mental health professionals:

Medical

 registered medical practitioner.

Nursing

registered nurse.

Allied health

allied health professionals.

Other

access to visiting mental health professionals. As per Level 2, plus:

Medical

 limited access to registered medical specialist with credentials in psychiatry.

Nursing

 baccess to two or more qualified and/or experienced mental health nurses.

Allied health

 access to allied health professionals with qualifications and/or experience in mental health.

Other

 access to some visiting specialties in health and/or mental health A per Level 3, plus:

Medical

- registered
 medical
 specialist with
 credentials in
 psychiatry for
 assessment,
 case
 management
 and review.
- may have
 extended-hours
 access to
 registered
 medical
 practitioner in
 psychiatry under
 supervision (e.g.
 psychiatry
 registrar).

Nursing

business hours—
to registered
nurse with
qualifications
and/o
experience in
mental health.

access—during

As per Level 4, plus:

Medical

 access—during business hours to registered medical specialist with credentials in psychiatry for assessment, case management and review.

Nursing

access—during
business hours—
to registered
nurse with
extensive mental
health
experience
and/or
qualifications in
mental health.

Allied health

access—during business hours to multidisciplinary team of allied health As per Level 5, plus:

Medical

- extended-hours access to registered medical specialist with credentials in psychiatry for assessment, case management and review.
- extended-hours access to registered medical practitioner with credentials in psychiatry (psychiatry registrar).

Nursing

 extended-hours access to registered nurses with extensive mental health experience and/or

(e.g. Community professionals qualifications in Allied health Forensic mental health. with access—during qualifications Outreach Allied health business hours-Service). and/or to allied health experience in extended-hours professional/s mental health. access to with multidisciplinary access to qualifications team of allied psychology, and/or health social work, experience in professionals occupational mental health. with mental therapy, speech health pathology and qualifications dietetic services and/or access to experience, dedicated some with: pharmacy specialist services for qualificatio mental health. ns / Other experience in specific access to range intervention of visiting or areas local health / relevant to mental health service specialties. being provided postgraduat qualificatio ns. Other

						 access to extensive range of visiting or local health / mental health specialties.
Specific risk considerations	• Nil					

Support service requirements for adult ambulatory mental health services

	Level 1		Level 2	2	Level 3	3	Level 4	•	Level 5	;	Level 6	;
	On- site	Accessible										
Medical imaging	i	1		1		1		2		2		2
Medication		1		2		2		2		3		4
Pathology		1		1		2		2		2		2

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach

Subsection 1.2 – Adult Acute Inpatient Service

	Level 2	Level 3	Level 4	Level 5	Level 6
Service description	 capable of providing limited short-term or intermittent inpatient mental health care to low-risk/complexity voluntary adult mental health consumers. may manage involuntary inpatient for short periods where authorised under Mental Health Act 2016. provides general health care 24 hours a day. delivered predominantly by team of general health clinicians within a facility without dedicated mental health staff (on-site) or allocated beds. medical services provided on-site or in 	 capable of providing short- to mediumterm or intermittent inpatient mental health care to lowrisk/complexity voluntary adult mental health consumers. provides general healthcare and mental health care 24 hours a day. delivered predominantly by general and mental health professionals (on-site) within a general medical facility that has limited number of allocated mental health beds or may operate as mental health special care suite/area. service provision typically includes: assessment and 	 capable of providing short- to mediumterm and intermittent inpatient mental health care to lowand moderaterisk/complexity voluntary adult mental health consumers (adolescent consumers older than 14 years and older persons-aged 65 and older-may access this service where clinically and developmentally appropriate, and in line with policy and procedural documentation of the adult service). provides mental health care 24 hours a day. delivered predominantly by mental health 	 capable of providing short- to mediumterm and intermittent inpatient mental health care to low-, moderate- and highrisk/complexity voluntary and involuntary adult mental health consumers (adolescent consumers older than 14 years and older persons-aged 65 and older-may access this service where clinically and developmentally appropriate, and in line with policy and procedural documentation of the adult service. provides mental health care 24 hours a day. delivered predominantly by 	 capable of providing short- to mediumterm and intermittent inpatient mental health care to voluntary and involuntary adult mental health consumers who present with highest level of risk and complexity. may be targeted population with special care needs. may demonstrate most extreme comorbidities and/or indicators of treatment resistance. service is highly specialised and/or statewide inpatient service delivered from large general hospital incorporating dedicated mental health unit or may be delivered from

Level 2	Level 3	Level 4	Level 5	Level 6
close proximity to provide rapid response at all times. • service provision typically includes: assessment, brief interventions and monitoring; consumer and carer education and information; documented case review; consultationliaison with higher level mental health services; and referral, where appropriate.	targeted interventions by general and mental health professionals; consumer and carer education and information; documented case review; primary and limited secondary prevention programs; consultation-liaison with higher level mental health services; and referral, where appropriate. • if providing non- ablative neurosurgical procedures, agreement must exist with public or suitably licensed private health facility that provides higher level of mental health service for transfer of consumers following postoperative period- treating psychiatrist shall assess consumer prior to discharge to	professionals within a dedicated mental health hospital or a general hospital that has a dedicated mental health acute inpatient unit. • service provision typically includes: multidisciplinary assessment and targeted interventions by mental health professionals; consumer and carer education and information; documented weekly case review; some group programs; primary and secondary prevention programs; consultation-liaison with higher level mental health services; and referral, where appropriate.	multidisciplinary team of mental health professionals (psychiatrist, nurses, allied health professionals) within dedicated mental health hospital or general hospital that has dedicated mental health acute inpatient unit. • service provision typically includes: multidisciplinary assessment and targeted interventions by mental health professionals; consumer and carer education and information; documented weekly case review; group programs; extensive primary and secondary prevention programs; consultation-liaison with higher and lower level mental health	purpose-designed and built mental health facility. demonstrates specialist expertise in delivery of mental health services to a consumer group that cannot be safely and effectively cared for in any other level of acute inpatient mental health service. provides mental health service. provides mental health care 24 hours a day. delivered by highly specialised multidisciplinary team of mental health professionals (medical practitioners, psychiatrists, nurses, allied health and other specialists). medical services provided on-site or are in close proximity to provide rapid response at all times.

	Level 2	Level 3	Level 4	Level 5	Level 6
		determine whether transfer to higher level of mental health service is required to meet the clinical mental health needs of the consumer.		services; and referral, where appropriate.	service provision includes: multidisciplinary assessment and specialised interventions by mental health professionals; consumer and carer education; documented daily case review; targeted group programs; all levels of prevention programs / services; consultation-liaison with lower level mental health services; and referral, where appropriate.
Service requirements	As per module overview, plus: • identification, initial acute assessment, brief intervention and monitoring of uncomplicated mental health problems.	As per Level 2, plus: • identification, acute assessment, brief intervention and monitoring of mental health problems (that may be associated with simple comorbidities and/or	As per Level 3, plus: • identification, ongoing assessment, monitoring and interventions of mental health problems (that may be associated with comorbidities and/or	As per Level 4, plus: • identification, ongoing assessment, monitoring and interventions of mental health problems ranging in risk and complexity (that may be associated with	As per Level 5, plus: • identification, ongoing assessment, monitoring and interventions of complex mental health problems (that may be associated with most complex comorbidities and/or

Level 2	Level 3	Level 4	Level 5	Level 6
 Medication management. forward referrals for expert assessment, diagnosis and intervention. development of care plan. limited psychoeducation (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services). mental health assessments and interventions conducted in consultation with mental health clinician where clinically indicated, and associated with documented review process. 	resistance to treatment). development of comprehensive individual mental health recovery plan within 1 week of assessment. limited range of primary (e.g. stress management) and secondary (e.g. weight management) prevention services. psychoeducation (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services). mental health assessments, interventions and monitoring conducted by general and mental health	 indicators of treatment resistance). integrated approach to identification, assessment and intervention of any cooccurring substance-use disorders. extensive clinical detail collected to inform assessment, diagnosis, intervention and recovery. range of primary (e.g. stress management) and secondary (e.g. weight management) prevention services. psychoeducation for the consumer and family / carer (including information about available mental health services, mental health problems and illnesses, indicated 	complex comorbidities and/or indicators of treatment resistance). targeted clinical programs for individuals /groups / families / carers (e.g. group therapy for consumers with Bipolar Affective Disorder). extensive range of primary (e.g. stress management) and secondary (e.g. weight management) prevention services. mental health assessments, interventions and monitoring conducted by multidisciplinary team of mental health professionals. authorised mental health Act 2016. may provide range of additional clinical	 indicators of treatment resistance). extensive clinical detail collected to inform assessment, diagnosis, intervention and recovery, and broader service delivery in all levels of service. extensive range of primary (e.g. stress management), secondary (e.g. weight management) and tertiary (e.g. psychosis treatment maintenance) prevention services. statewide clinical forums to assist dissemination of clinical expertise. psychoeducation for consumers, families / carers and groups (including information about available mental health services, mental health

Level 2	Level 3	Level 4	Level 5	Level 6
 mental health assessments and brief interventions / monitoring (and referrals to other mental health services) conducted by general health clinicians of this service. documented processes with Level 5 acute inpatient mental health service additional mental health interventions may be directly provided by mental health clinicians using telehealth facilities, visiting and/or community-based workforce. 	clinicians of this service. an infant can only be admitted with his/her mother to an adult acute mental health inpatient unit as defined in Subsection 4.3, Perinatal and Infant Services, of this module. if providing nonablative neurosurgical procedures, on-site Level 6 surgical service.	treatment options and support services). mental health assessments, interventions and monitoring conducted by team of mental health professionals. mental health assessments and interventions for adolescents conducted in consultation with child and youth mental health clinician from ambulatory service Level 4 or above, or acute inpatient service Level 5 or above where clinically indicated, and associated with documented review process. documented processes outlining supervisory requirements to ensure safety of	programs and service components, such as telehealth services or a day program.	problems and illnesses, indicated treatment options and support services). • separate clinical services for families / carers, if required. • service forms part of integrated mental health service and is based in a HHS or part of service network that also includes Level 5 or 6 adult ambulatory mental health service. specialist consultation liaison to other health and non-health services / agencies for target population. • may provide extensive range of additional clinical programs and service components, such as outreach services, telehealth services or day programs.

	Level 2	Level 3	Level 4	Level 5	Level 6
			adolescents admitted to the unit. documented processes with Level 4, 5 or 6 child and youth acute inpatient mental health service. as clinically indicated, ECT services may be facilitated and/or provided at this service level by mental health service authorised to provide ECT under Mental Health Act 2016.		
Workplace requirements	As per module overview, plus: Medical admitted by registered medical practitioner. daily care coordinated by registered medical practitioner who has access to registered medical specialist with credentials in	As per Level 2, plus: Medical admitted by / under registered medical specialist with credentials in psychiatry. daily care coordinated by registered medical specialist with credentials in psychiatry and/or	As per Level 3, plus: Medical access—24 hours—to registered medical specialist with credentials in psychiatry for assessment, treatment, case management and case review. access—24 hours—to registered medical	As per Level 4, plus: Allied health access to allied health professionals e.g. psychology, social work, occupational therapy, speech pathology and dietetic services (relevant postgraduate qualifications desirable).	As per Level 5, plus: Medical access—24 hours—to registered medical practitioner (psychiatry registrar / principal house officer / senior medical officer / career medical officer) with credentials relevant to the discipline.

Level 2	Level 3	Level 4	Level 5	Level 6
psychiatry to assist and guide assessment, treatment, case management and case review (may be via telehealth). • medical services provided on-site or in close enough proximity to provide rapid response at all times. Nursing • suitably qualified and experienced registered nurse in charge (however titled) of unit. • qualified and experienced registered nurse in charge of each shift with skills appropriate to service being provided. • other suitably qualified nursing staff working within their	registered medical practitioner who has access to registered medical specialist with credentials in psychiatry to assist and guide assessment, treatment, case management and case review (may be via telehealth). • if providing nonablative neurosurgical procedures, surgical service provided by qualified and experienced specialist medical practitioner with credentials in neurosurgery. Nursing • at least one registered nurse per shift with qualifications and/or experience in mental health. Allied health	specialist with credentials in psychiatry and a certificate in child and adolescent psychiatry (or equivalent) to assist and guide assessment, treatment, case management and case review (may be via telehealth). Nursing • registered nurse in charge of each shift is suitably qualified and/or experienced mental health professional. • two or more registered nurses per shift qualified and/or experienced in mental health. • if inpatient unit occupancy is low, only one registered nurse per shift qualified	 access to dedicated pharmacy services for mental health. Other access to extensive range of on-site and/or visiting specialties in health / mental health. 	majority of registered nursing staff qualified mental health practitioners and have extensive mental health experience. Allied health extended-hours access to community-or hospital-based allied health professionals with relevant specialist mental health qualifications and experience.

!	Level 2	Level 3	Level 4	Level 5	Level 6
	scope of clinical practice. • access—during business hours—to registered nurse with qualifications in mental health and/or extensive mental health experience who can provide advice, support and direction for nursing care. Allied health • access—during business hours—to allied health professionals. Other • AINs or equivalent may complement clinical team at discretion of nurse in charge. • Bachelor of Nursing students (second or third year undergraduate) may complement clinical team at discretion of nurse in charge.	access—during business hours—to community- or hospital-based allied health professionals with qualifications and/or experience in mental health.	and/or experienced in mental health. Allied health access—during business hours—to community- or hospital-based allied health staff with qualifications and/or experience in adult acute mental health. access to dedicated pharmacy services for mental health. Other access to some onsite and/or visiting specialties in health / mental health.		

	Level 2	Level 3	Level 4	Level 5	Level 6
	nurse in charge and under registered nurse supervision. access to IPRA (public sector only).				
Specific risk considerations	Nil	Nil	Nil	Nil	Nil

Support service requirements for acute inpatient mental health services

	Level 2		Level 3		Level 4		Level 5		Level 6	
	On-site	Accessible								
Anaesthetics					3*		3*		3*	
Medical imaging		1		1		2		2	2	
Medication		2		2	3		4		5	
Pathology		1		2		2		2		2
Perioperative (relevant section/s)			6**		3*		3*		3*	

	Level 2	Level 3	Level 4	Level 5	Level 6
Surgical		6**			

Required only if ECT* and/or non-ablative neurosurgical procedures ** performed

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

Subsection 1.3 – Adult Non-Acute Inpatient Service

	Level 4	Level 5	Level 6
Service description	 capable of providing medium- to long term inpatient mental health care to low and moderate-risk/complexity voluntary adult mental health consumers 24 hours a day. 	 capable of providing medium- to long term inpatient mental health care to low- , moderate- and high-risk/complexity voluntary and involuntary adult mental health consumers. 	 capable of providing medium- to long term inpatient mental health care to voluntary and involuntary adult mental health consumers presenting with highest level of risk and complexity.
	 may manage involuntary inpatient for short periods where authorised under Mental Health Act 2016. target population includes those within service-identified age range who either require graduated entry back into community post-hospitalisation, or require extended and intensive clinical interventions, but do not need or would not benefit from a mental health acute inpatient admission. delivered predominantly by mental health professionals who provide 	 provides daily clinical care and rehabilitation to targeted population of consumer s(e.g. those with dual diagnosis of mental health disorder and acquired brain injury) 24 hours a day. target population for this service includes those within service-identified age range who require extended and intensive clinical interventions (some may require high levels of security), and whose clinical needs are not able to be safely and adequately met in an adult acute inpatient mental health service. 	 demonstrates specialist mental health expertise in delivery of mental health services to members of targeted population—some of whom will present with special care needs requiring nonacute extended inpatient mental health treatment and rehabilitation—24 hours a day. highly specialised and/or statewide extended care inpatient service predominantly provided by multidisciplinary team of mental health professionals (medical practitioners,

	Level 4	Level 5	Level 6
	supervised and structured living environment, such as that of a Community Care Unit. • based in the community or may be collocated with a hospital-based medical /mental health service. • provides daily clinical care and rehabilitation to consumers on an extended basis before they move to more independent living arrangements. • service provision typically includes: multidisciplinary assessment and targeted interventions and rehabilitation by mental health professionals; consumers and carer education and information; documented weekly case review; group programs; primary and some secondary prevention programs; consultation-liaison with lower and higher level mental health services; and referral, where appropriate.	 delivered predominantly by multidisciplinary team of mental health professionals (psychiatrists, nurses, allied health) who provide a supervised, structured and secure environment (e.g. a Medium Secure Unit). service provision typically includes: multidisciplinary assessment and targeted interventions and rehabilitation by mental health professionals; consumer and carer education and information; documented weekly case review; group programs; primary and secondary prevention programs; consultation-liaison with lower and higher level mental health services; and referral, where appropriate. 	psychiatrists, nurses, allied health and other specialists). • service provision includes: multidisciplinary assessment and specialised interventions by mental health professionals; consumer and carer education and information; documented frequent case review; targeted group programs; all levels of prevention programs/services; and referral, where appropriate.
Service requirements	As per module overview, plus: • identification, ongoing assessment, monitoring, interventions and rehabilitation of mental health problems ranging in risk and complexity (that may be associated with comorbidities and/or indicators of treatment resistance).	 co-located with hospital-based medical / mental health service or part of purpose designed and built mental health facility. identification, ongoing assessment, monitoring, interventions and rehabilitation of mental health problems ranging in risk and complexity (that may 	 As per Level 5, plus: primary service site co-located with adult acute inpatient mental health unit or, alternatively, primary service site may be purpose-designed and built mental health facility. identification, ongoing assessment, monitoring, interventions and

Level 4	Level 5	Level 6
 integrated approach to identification, assessment and intervention of any cooccurring substance-use disorders. targeted clinical programs for individuals / groups / families / carers (e.g. group therapy for families/carers of consumers with a psychotic illness). medication management. forward referrals for assessment, diagnosis and intervention as required. development of comprehensive individual mental health recovery plan within 1 week of assessment. extensive range of primary (e.g. parenting support) and secondary (e.g. weight management) prevention services. psychoeducation for consumer and family/carers (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services). mental health assessments, interventions, rehabilitation and monitoring conducted by multidisciplinary team of mental health professionals. additional mental health interventions may be directly provided by mental health clinicians using telehealth 	be associated with complex comorbidities and/or indicators of treatment resistance). extensive clinical detail collected to inform assessment, diagnosis, intervention and recovery. range of additional programs and service components (e.g. partial hospitalisation, consultation-liaison services, rehabilitation programs and telehealth). mental health assessments, interventions, rehabilitation and monitoring conducted by multidisciplinary team of mental health professionals. authorised mental health service under Mental Health Act 2016.	rehabilitation of complex mental health problems (that may be associated with the most complex comorbidities and/or indicators of treatment resistance). • extensive clinical detail collected to inform assessment, diagnosis, intervention and recovery, and broader service delivery in all levels of service. • extensive range of primary (e.g. stress management), secondary (e.g. weight management) and tertiary (e.g. psychosis treatment maintenance) prevention services. • statewide clinical forums to assist dissemination of clinical expertise. • psychoeducation for consumers, families/carers and groups (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services). • extensive range of additional programs and service components (e.g. step-down programs, consultation-liaison services, rehabilitation programs and telehealth).

	Level 4	Level 5	Level 6
Waylefayea	facilities, visiting and/or community-based workforce. service provision occurs alongside ongoing consultation-liaison with referring service / practitioner.		
Workforce requirements	 As per module overview, plus: Medical admitted by / under registered medical specialist with credentials in psychiatry. access—during business hours—to registered medical specialist with credentials in psychiatry for assessment, treatment, case management and case review. Nursing suitably qualified and experienced registered nurse (however titled) in charge of unit. registered nurse in charge of each shift has mental health qualifications and/or experience in mental health. two or more registered nurses per shift qualified and/or experienced in mental health. if inpatient unit occupancy is low, only one registered nurse per shift qualified and/or experienced in mental health. 	 As per Level 4, plus: Medical access—24 hours—to registered medical specialist with credentials in psychiatry for assessment, treatment, case management and case review. access—24 hours—to support by registered medical practitioner/s. Allied health access—during business hours—to multidisciplinary team of allied health professionals (relevant postgraduate training is desirable). access to dedicated pharmacy services for mental health. Other access to wide range of visiting or local health / mental health specialties. 	 Medical medical services provided on-site or are in close enough proximity to provide rapid response at all times. Mursing majority of registered nursing staff qualified mental health practitioners and have extensive mental health experience. Allied health extended-hours access to community- or hospital-based allied health professionals with qualifications and experience in mental health. some clinicians will be specialists in specific intervention areas relevant to service being provided. Other access to extensive range of specialist health service providers (not all of whom are required to be on-site).

'	Level 4	Level 5	Level 6
	 Allied health access—during business hours—to community- or hospital-based allied health professionals e.g. psychology, social work, occupational therapy, speech pathology and dietetic services. Other access to range of visiting or local health / mental health specialties. AINs or equivalent may complement clinical team at discretion of nurse in charge. Bachelor of Nursing students (second or third year undergraduate) may complement clinical team at discretion of nurse in charge and under registered nurse supervision. access to IPRA (public sector only). 		
Specific risk considerations	Nil	Nil	Nil

Support service requirements for adult non-acute inpatient mental health services

	Level 4		Level 5	Level 5		
	On-site	Accessible	On-site	Accessible	On-site	Accessible
Anaesthetics*	3		3		3	
Medical imaging		2		2		3
Medication	3		4		4	
Pathology		2		2		3
Perioperative (relevant section/s)*	3		3		3	

^{*}Required only if ECT performed

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

Section 2 Child and Youth Services

Subsection 2.1 – Ambulatory Service

	Level 1	Level 2	Level 3	Level 4	Level 5	Level 6
Service description	 capable of providing some limited short term or intermittent non-admitted mental health care to low risk/complexity voluntary mental health consumer up to 18 years. may only be accessible for limited hours. delivered predominantly by one or more general health clinicians who provide local community healthcare service that is 	 capable of providing short-to medium term or intermittent non-admitted mental health care to low risk/complexity voluntary mental health consumers up to 18 years. accessible during business hours. delivered predominantly by team of general health clinicians and visiting mental health professionals who provide local community 	 capable of providing short-to long-term or intermittent non-admitted mental health care to low and moderate risk/complexity voluntary mental health consumers up to 18 years. delivered predominantly by small team (not necessarily multidisciplinary) of mental health professionals who provide local mental health care service via hospital-based 	 capable of providing short-to long-term or intermittent non-admitted mental health care to low and moderate risk/complexity voluntary and, if authorised to do so, involuntary mental health consumers up to 18 years. accessible during business hours with exception of day programs, which are delivered primarily during school terms and consist of block-based 	 capable of providing short-to long-term or intermittent non-admitted mental health care to high risk/complexity voluntary and involuntary mental health consumers up to 18 years. accessible during business hours and consumers have access to limited extended-hours service. day programs delivered primarily during school terms and consist of 	 capable of providing short-to long-term or intermittent non-admitted mental health care to highest risk/complexity voluntary and involuntary mental health consumers up to 18 years. consumer group accessing this service level may be targeted population with special care needs who may demonstrate most severe comorbidities and/or indicators of

- non-specific to mental health.
- typically, service delivered via community clinic or home-based care.
- service provision typically includes: basic screening and assessment; brief and/or basic intervention; consumer and carer education; primary care and prevention programs; and referral, where appropriate.

- healthcare service.
- general health clinicians have qualifications and/or experience in mental health care.
- some mental health specific services /programs provided at this level.
- may be delivered via hospital-based outpatient clinic, community clinic or home-based care.
- service provision typically includes: assessment; interventions including counselling; consumer and carer education and information; documented

- outpatient clinic, community mental health clinic or homebased care.
- most clinical team members have qualifications and/or experience in child and youth mental health care.

service provision

typically includes: assessment and targeted interventions by mental health professionals; care coordination / case management: consumer and carer education and information: documented case review: primary and limited

- intervention periods.
- delivered predominantly multidisciplinary team of child and youth mental health professionals who provide local mental health care service via hospital-based outpatient clinic or day program, community mental health clinic or through homebased care.
- typically
 includes:
 multidisciplinary
 assessment and
 targeted
 interventions by
 mental health
 professionals;
 care
 coordination /
 case

service provision

- block-based intervention periods.
- delivered predominantly by multidisciplinary team of child and youth mental health professionals who provide local mental health care service via a hospital-based outpatient clinic, community mental health clinic. homebased care or hospital- or communitybased day program.
- service provision typically includes: multidisciplinary assessment and targeted interventions by mental health professionals;

- treatment resistance.
- accessible during business hours and extended-hours service provided.
- delivered by multidisciplinary team of child and youth mental health professionals providing specialist mental health care service either locally and/or across HHS or service areas via a hospital-based outpatient clinic, community mental health clinic. homebased care or through hospital- or communitybased day program.
- service provision includes: multidisciplinary

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Mental health services - CSCF v3.2

secondary

		case review; primary prevention programs; consultation- liaison with higher level mental health services; and referral, where appropriate.	prevention programs; consultation- liaison with higher level mental health services; and referral, where appropriate.	management; consumer and carer education and information; documented weekly case review; some group programs; primary and secondary prevention programs; consultation and liaison with lower and higher level mental health services; and referral, where appropriate.	care coordination / case management; consumer and carer education and information; documented frequent case review; group programs; primary and secondary prevention programs; consultation- liaison with lower and higher level mental health services; and referral, where appropriate.	assessment and specialised interventions by mental health professionals; care coordination / case management; consumer and carer education; documented frequent case review; targeted group programs; all levels of prevention programs/ services; consultation and liaison with lower level mental health services; extended hours service; and referral, where appropriate.
Service requirements	As per module overview, plus: identification, initial acute assessment and	As per Level 1, plus: • identification, initial acute assessment and interventions for	identification, ongoing assessment, monitoring and	As per Level 3, plus: • development of comprehensive individual mental health	As per Level 4, plus: • authorised service under	identification, ongoing assessment, monitoring and

- brief interventions of uncomplicated mental health problems.
- forward referrals for expert assessment, diagnosis and/or intervention as required.
- development of a care plan.
- basic clinical detail collected to inform assessment, diagnosis, intervention and/or recovery.
- limited psychoeducation
- mental health
 assessments and
 interventions
 (and referrals to
 other mental
 health services)
 conducted by
 general health
 clinicians of this
 service.

- mental health problems (that may be associated with simple comorbidities and/or resistance to treatment).
- limited range of primary prevention services (e.g. parenting support).
- Psychoeducation
 (including
 providing
 information
 about available
 mental health
 services, mental
 health problems
 and illnesses,
 indicated
 treatment
 options and
 support
 services).
- mental health
 assessments and
 interventions
 conducted by
 one or more

- interventions for mental health problems that may be associated with comorbidities and/or resistance to treatment.
- Integrated identification, assessment and intervention of any co-occurring substance-use disorders.
- development of individual mental health recovery plans.
- range of primary
 (e.g. parenting
 support) and
 some limited
 secondary (e.g.
 weight
 management)
 prevention
 services.
- psychoeducation for consumer and family/carer (including

- recovery plan within 1 week of assessment.
- extensive
 clinical detail
 collected to
 inform
 assessment,
 diagnosis,
 intervention
 and/or recovery.
- extensive range of primary (e.g. parenting support) and secondary (e.g. weight management) prevention services.
- outreach
 applicable to
 service and
 target
 population.
- mental health
 assessments and
 interventions
 conducted by
 team of mental
 health
 professionals

- Mental Health Act 2016.
- identification. ongoing assessment, monitoring and interventions for mental health problems ranging in risk and complexity (that may be associated with complex comorbidities and/or indicators of treatment resistance).
- targeted clinical programs for individuals / groups / families (e.g. group therapy for families / carers of patients with psychotic illness).
- psychoeducation for patients, families /carers and groups (including

- interventions for complex mental health problems (that may be associated with most complex comorbidities and/or indicators of treatment resistance).
- extensive
 clinical detail
 collected to
 inform
 assessment,
 diagnosis,
 intervention
 and/or recovery
 and broader
 service delivery
 in all levels of
 service.
- extensive range of primary (e.g. parenting support), secondary (e.g. weight management) and tertiary (e.g. psychosis treatment maintenance)

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- mental health assessments and interventions conducted in consultation with child and youth mental health clinician, from Level 4 ambulatory service or above. where clinically indicated, and associated with documented review process.
- service is based within a HHS or is part of a service network that includes Level 5 or 6 child/adolescent acute inpatient mental health unit.

general health clinicians with qualifications and/or experience in mental health and/or by visiting mental health professionals.

- information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- documented processes and collaborative partnerships with schools, education networks and service providers as required.
- mental health
 assessments and
 interventions
 conducted by
 team (not
 necessarily
 multidisciplinary
) of mental
 health
 professionals,
 most of whom
 have
 qualifications

- with
 qualifications
 and/or
 experience in
 child and youth
 mental health.
- may be authorised mental health service under Mental Health Act 2016.
- information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- separate clinical services for families/ carers, if required.
- consultationliaison services to local children's health services as required. mental health assessments and interventions conducted by multidisciplinary team of mental health professionals with qualifications and/or experience in

- prevention services.
- statewide clinical forums to assist dissemination of clinical expertise.
- Specialist
 consultationliaison to other
 health and nonhealth services
 /agencies for
 target
 population.
- assertive outreach applicable to service and target population.
- may provide
 extensive range
 of additional
 clinical
 programs and
 service
 components,
 such as outreach
 service,
 telehealth
 services or

			and/or experience in child and youth mental health.		child and youth mental health. service based within HHS or is part of service network that also includes Level 5 or 6 child / adolescent acute inpatient mental health unit. service provision may occur across a range of sites (e.g. hospital, school, home, recreational venues), and service capacity and resources must be sufficient to transport patients individually and/or as a group.	extended treatment program.
Workforce requirements	As per module overview, plus access to one or more of following (visiting	As per Level 1, plus access to one or more of following qualified and	As per Level 2, plus: Medical	As per Level 3, plus: Medical	As per Level 4, plus: Medical	As per Level 5, plus: Medical

basis or outreach services):

Medical

registered medical practitioner.

Nursing

registered nurse.

Allied health

 allied health professionals.

Other

 access to IPRA (public sector only). experienced mental health professionals:

Medical

 registered medical
 practitioner.

Nursing

registered nurse.

Allied health

 allied health professionals.

Other

access to visiting mental health professionals. limited access to registered medical specialist with credentials in psychiatry and certificate in child and adolescent psychiatry (or equivalent).

Nursing

 access to two or more registered nurses with qualifications and/or experience in child and youth mental health.

Allied health

 access to allied health professionals with qualifications and/or experience in child and youth mental health.

Other

access to
registered
medical
specialist with
credentials in
psychiatry and
certificate in
child and
adolescent
psychiatry (or
equivalent) for
assessment,
case
management
and review.

 access—during business hours to registered medical specialist with credentials in paediatrics for medical consultation liaison.

Nursing

 access—during business hours to registered nurse with qualifications and/or experience in access—during business hours and limited extended hours-to registered medical specialist with credentials in psychiatry and certificate in child and adolescent psychiatry (or equivalent) for assessment, case management and review.

Nursing

business hours—
to registered
nurse with
extensive
experience in
mental health
and/or
qualifications in
mental health
and
qualifications
and/or

access—during

- extended-hours access to registered medical specialist with credentials in psychiatry and certificate in child and adolescent psychiatry (or equivalent) for assessment, case management and review.
- extended-hours access to registered medical practitioner in psychiatry under supervision (e.g. psychiatry registrar).

Nursing

 extended-hours access to registered nurses with qualifications and experience in child and

- access to some visiting specialties in health and/or mental health (e.g. Child and Youth Forensic Outreach Service).
- may have access to school-based youth health nurse.

child and youth mental health.

Allied health

 access—during business hours to multidisciplinary team of allied health professionals with qualifications and/or experience in child and youth

mental health.

experience in child and youth mental health.

Allied health

- business hours—
 to
 multidisciplinary
 team of allied
 health
 professionals
 with child and
 youth mental
 health
 qualifications
 and/or
 experience.
- access to
 psychology,
 social work,
 occupational
 therapy, speech
 pathology and
 dietetic services.
- access to dedicated pharmacy services for mental health.

Other

access to range of visiting or

- youth mental health.
- some of these clinicians have:
 - demonstrat
 ed specialist
 qualificatio
 ns and
 experience
 in specific
 intervention
 areas
 relevant to
 service
 being
 provided
 - postgraduate qualificatio ns.

Allied health

extended-hours
access to
multidisciplinary
team of allied
health
professionals
with child and
youth mental
health
qualifications
and experience.

					local health / mental health specialties.	some of these clinicians have:
Specific risk considerations	Nil	Nil	Nil	Nil	Nil	Nil

Support service requirements for child and youth ambulatory mental health services

	Level 1		evel 1 Level 2 Leve		Level	el 3 Level 4		Level 5		Level 6		
	On- site	Accessible	On- site	Accessible	On-	Accessible	On- site	Accessible	On- site	Accessible	On- site	Accessible
Medical imaging		1		1		1		2		2		2
Medication		1		2		2		2		3		4
Pathology		1		1		2		2		2		2

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

Subsection 2.2 – Acute Inpatient Services

	Level 2	Level 3	Level 4	Level 5	Level 6	
Service description	capable of providing limited short-term (up to 72 hours) or intermittent inpatient mental health care to lowrisk/complexity voluntary mental health consumers up to 18 years (time frames beyond this require specific	capable of providing short- and mediumterm (1 week to 10 days) or intermittent inpatient mental health care to low risk/ complexity voluntary mental health consumers up to 18 years (time frames beyond this require specific	• capable of providing short- to long-term (4 to 6 weeks) or intermittent inpatient mental health care to lowand moderate risk/complexity voluntary and, if authorised to do so, involuntary mental health consumers up to 18	• capable of providing short- to long-term and intermittent inpatient mental health care to low moderate- and high risk/ complexity voluntary and involuntary mental health consumers up to 18 years 24 hours a day.	• capable of providing short to long-term and intermittent inpatient mental health care 24 hours a day to voluntary and involuntary mental health consumers up to 18 years who present with highest level of risk and complexity.	

- consultation with higher level child and youth mental health acute inpatient service that will contribute in ongoing manner to case review and management).
- provides general healthcare and some limited mental health care 24 hours a day.
- delivered
 predominantly by
 team of general
 health clinicians
 within a hospital that
 does not have
 dedicated mental
 health staff (on-site)
 or allocated beds.
- service provision typically includes: assessment, brief interventions and monitoring; consumer and carer education and information; documented case review; consultation liaison with higher level mental health

- consultation with higher level acute inpatient service for child and youth mental health who will continually contribute to case review and management).
- provide some mental health care 24 hours a day.
- delivered predominantly by team of general and children's health professionals within hospital that has paediatric unit or beds.
- does not have allocated mental health beds or staff on-site.
- service provision typically includes: assessment, interventions and monitoring; consumer and carer education and information; documented case

- years (time frames beyond this require specific consultation with higher level child and youth mental health acute inpatient service that will contribute in ongoing manner to case review and management).
- provides mental health care 24 hours a day.
- delivered predominantly by team of mental health clinicians and general or children's health professionals within hospital that has allocated mental health beds for children and/or adolescents.
- service provision typically includes: multidisciplinary assessment, targeted interventions and monitoring; consumer and carer education and information;

- predominantly by child and youth mental health professionals within dedicated child and youth mental health unit.
- service provision typically includes: multidisciplinary assessment and targeted interventions by mental health professionals: consumer and carer education and information: documented weekly case review; group programs; extensive primary and secondary prevention programs; consultation liaison with higher and lower level mental health services: and referral, where appropriate.
- consumer group may be targeted population with special care needs.
- may demonstrate most extreme comorbidities and/or indicators of treatment resistance.
- highly specialised and/or statewide inpatient service delivered from child /adolescent hospital that incorporates dedicated mental health unit or may be delivered from purpose designed and built mental health facility.
- demonstrates
 specialist expertise
 in delivery of mental
 health services to a
 patient group that
 cannot be safely and
 effectively cared for
 in any other level of
 acute inpatient
 mental health
 service.

	services; and referral, where appropriate.	review; consultation- liaison with higher level mental health services; and referral, where appropriate.	documented weekly case review; some group programs; consultation-liaison with higher level mental health services; and referral, where appropriate.		 delivered by a highly specialised, multidisciplinary team of child and youth mental health professionals. has statewide and/or interstate health service functions. service provision includes: multidisciplinary assessment and specialised interventions by mental health professionals; consumer and carer education; documented daily case review; targeted group programs; all levels of prevention programs / services; consultation liaison with lower level mental health services; and referral, where appropriate.
Service requirements	As per module overview, plus:	As per Level 2, plus: • identification, acute assessment,	As per Level 3, plus: • identification, ongoing assessment,	As per Level 4, plus: • identification, ongoing assessment,	As per Level 5, plus: • identification, ongoing assessment,

- identification, initial acute assessment, brief intervention and monitoring of uncomplicated mental health problems.
- development of care plan.
- medication management.
- forward referrals for expert assessment, diagnosis and intervention as required.
- limited
 psychoeducation
 (including
 information about
 available mental
 health services,
 mental health
 problems and
 illnesses, indicated
 treatment options
 and support
 services).
- additional mental health interventions may be directly provided by mental health clinicians

- intervention and monitoring of mental health problems (that may be associated with simple comorbidities and/or resistance to treatment).
- basic clinical detail collected to inform assessment, diagnosis, intervention and recovery.
- limited range of primary (e.g. parenting support) and secondary (e.g. weight management) prevention services.
- psychoeducation (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).

- monitoring and interventions for mental health problems (that may be associated with comorbidities and/or indicators of treatment resistance).
- integrated approach to identification, assessment and intervention of any cooccurring substance use disorders.
- development of comprehensive individual mental health recovery plans within 1 week of assessment.
- may be an authorised mental health service under Mental Health Act 2016.
- extensive clinical detail collected to inform assessment, diagnosis, intervention and recovery.

- monitoring and interventions for mental health problems ranging in risk and complexity (that may be associated with complex comorbidities and/or indicators of treatment resistance).
- targeted clinical programs for individuals / groups /families / carers (e.g. group therapy for families/ carers of patients with psychotic illness).
- extensive range of primary (e.g. parenting support) and secondary (e.g. weight management) prevention services.
- authorised mental health service under Mental Health Act 2016.
- as clinically indicated, ECT services may be

- monitoring and interventions for complex mental health problems (that may be associated with most complex comorbidities and/or indicators of treatment resistance).
- extensive clinical detail collected to inform assessment, diagnosis, intervention, recovery and broader service delivery in all levels of service.
- extensive range of primary (e.g. parenting support), secondary (e.g. weight management) and tertiary (e.g. psychosis treatment maintenance) prevention services.
- statewide clinical forums to assist dissemination of clinical expertise.

- using telehealth facilities, visiting and/or community based workforce.
- assessments and interventions conducted in consultation with child and youth mental health clinician where clinically indicated, and associated with documented review process.
- documented processes with Level 5 or 6 child/adolescent acute inpatient mental health service.
- considers necessity of parent / carer being admitted with child aged 5 years and younger.

- range of primary (e.g. parenting support) and secondary (e.g. weight management) prevention services.
- psychoeducation for consumer and family / carer (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- documented
 processes and
 collaborative
 partnerships
 established with
 schools, education
 networks and service
 providers.
- facilitated and/or provided by mental health service authorised to provide ECT under Mental Health Act 2016, and under care of registered medical specialist with credentials in psychiatry and certificate in child and adolescent psychiatry (or equivalent), and in accordance with Mental Health Act 2016.
- may provide a range of additional clinical programs and service components, such as telehealth services or a day program.

- separate clinical services for families / carers, if required.
- specialist
 consultation liaison
 to other health and
 non-health services /
 agencies for target
 population.
- psychoeducation for consumer, families / carers and groups (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- forms part of integrated mental health service and is based in a HHS, or is part of service network that also includes Level 5 or 6 child and youth ambulatory mental health service.

				 may provide extensive range of additional clinical programs and service components, such as an outreach service, telehealth services or day program.
requirements Medical consists by repract daily coor regis pract acce med with psyc cert and psyc equ and asse trea mar case	by regist practitioner. y care specialist practitioner who has ess to registered lical specialist registered lical specialist registered lical specialist practitioner who has ess to registered lical specialist registered lical specialist registered licate in child adolescent chiatry (or ivalent) to assist guide sessment, tment, case by registered practition registered registered specialist re	medical er admitted ered medical oner or ed medical st with als in rics. re ented by ed medical oner or equivaler oner or coordina registere specialist oredentia	Medical r admitted r registered specialist lentials in ry and e in child escent ry (or nt). ested by d medical t with las in ry who has leas in ry who has leas in ry and e in child escent ry (or nt). Results in ry who has leas in ry who has leas in ry and e in child Medical registered m specialist wit credentials i psychiatry al certificate in and adolesc psychiatry (or equivalent) t and guide assessment, treatment, or management review. Nursing • registered m (however titl charge of un qualified and experienced	Medical ours—to nedical th registered medical practitioner (psychiatry registrar / principal house officer / senior medical officer / career medical officer) with credentials relevant to the discipline. ase t and medical services provided on-site or in close enough proximity to provide rapid response at all times. Allied health extended-hours

medical services
provided on-site or
in close enough
proximity to provide
rapid response at all
times.

Nursing

- suitably qualified and experienced registered nurse (however titled) in charge of unit.
- qualified and experienced registered nurse in charge of each shift with skills appropriate to service being provided.
- other suitably qualified nursing staff working within their scope of clinical practice.
- access—during business hours—to registered nurse with extensive mental health qualifications and/or experience who can provide advice, support and

- equivalent) to assist and guide assessment, treatment, case management and case review (may be via telehealth).
- access to registered medical specialist with credentials in paediatrics for medical consultation liaison (may be via telehealth).

Nursing

 at least one registered nurse per shift with qualifications and/or experience in children's health. psychiatry (or equivalent) to assist and guide assessment, treatment, case management and case review (may be via telehealth).

Nursing

- two or more registered nurses per shift qualified and experienced in mental health.
- if inpatient unit occupancy is low, only one registered nurse per shift qualified and experienced in mental health.

Allied health

 access—during business hours—to community- or hospital based allied health staff with qualifications and/or experience in mental health.

Other

- and youth mental health.
- qualified and/or experienced registered nurse in charge of each shift with extensive skills appropriate to service being provided.
- majority of unit
 nursing staff have
 mental health
 qualifications and/or
 experience, and/or
 qualifications and/or
 experience in child
 and youth mental
 health, and/or
 children's health.

Allied health

 access—during business hours—to community- or hospital-based allied health staff with qualifications and/or experience in child and youth mental health (postgraduate qualifications desirable). hospital based allied health staff with qualifications and experience in child and youth mental health.

Other

- access to extensive range of on-site and/or visiting specialties in children's health.
- access to on-site school with school teachers who can provide range of educational services dedicated to children and/or adolescents with mental illness.

Specific viels	direction for nursing care. Allied health access—during business hours—to allied health professionals. Other assistants-in-nursing (AINs) or equivalent may complement clinical team at discretion of nurse in charge (however titled). Bachelor of Nursing students (second or third year undergraduate) may complement clinical team at discretion of nurse in charge (however titled) and under registered nurse supervision. access to IPRA (public sector only).		access to some on- site and/or visiting specialties in health /mental health.	 access to psychology, social work, occupational therapy, speech pathology and dietetic services. access to dedicated pharmacy services for mental health. Other access to extensive range of on-site and/or visiting specialties in health/mental health. may have hospital-based school teacher dedicated to mental health consumer. 	
Specific risk considerations	Nil	Nil	Nil	Nil	Nil

Support service requirements for child and youth acute inpatient mental health services

	Level 2		Level 3	Level 3 Level 4			Level 5		Level 6	
	On-site	Accessible	On-site	Accessible	On-site	Accessible	On-site	Accessible	On-site	Accessible
Children's anaesthetics*							3		3	
Medical imaging		1		1		2		2	2	
Medication	2		2		3		4		5	
Pathology		1		2		2		2		2
Perioperative (relevant sections)*							3		3	

^{*}Required only in services where ECT performed

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

Subsection 2.3 – Non-Acute Inpatient Services

Level 5

Service description

• capable of providing medium- to long-term inpatient mental health care to low-, moderate- and high-risk/complexity voluntary and involuntary mental health inpatients up to 18 years 24 hours a day.

• target population includes those within service-identified age range who require graduated entry back into the community post-hospitalisation, or extended and intensive clinical interventions, but do not need or would not benefit from a mental health acute inpatient admission.

- delivered predominantly by multidisciplinary team of child and youth mental health professionals who provide inpatient care to consumers across an extended period of time.
- service provision includes: multidisciplinary assessment and targeted interventions by mental health professionals; consumer and carer education and information; documented frequent case review; group programs; ongoing support of educational needs and documented processes with educational providers; primary and secondary prevention programs; consultation-liaison with higher and lower level mental health services; and referral, where appropriate.

Service requirements

As per module overview, plus:

- primary service site co-located with child/adolescent acute inpatient mental health unit or, alternatively, primary service site may be purpose designed and -built mental health facility.
- identification, ongoing assessment, monitoring, interventions and rehabilitation for mental health problems ranging in risk and complexity (that may be associated with complex comorbidities and/or indicators of treatment resistance).
- integrated approach to identification, assessment and intervention of any co-occurring substance-use disorders.
- targeted clinical programs for individuals / groups / families / carers (e.g. group therapy for families/carers of consumers with a psychotic illness).
- medication management.
- forward referrals for assessment, diagnosis and intervention as required.
- development of comprehensive individual mental health recovery plan within 1 week of assessment.
- extensive clinical detail collected to inform assessment, diagnosis, intervention and recovery.
- extensive range of primary (e.g. parenting support) and secondary (e.g. weight management) prevention services.
- psychoeducation for consumer and family / carer (including information about available mental health problems and illnesses, indicated treatment options and support services).
- authorised mental health service under Mental Health Act 2016.
- service provision occurs alongside ongoing consultation-liaison with the referring service / practitioner.
- range of additional programs and service components (e.g. partial hospitalisation, consultation-liaison services, rehabilitation programs, telehealth).

- service provision may occur across range of sites (e.g. hospital, school, home, recreational venues) and service capacity and resources must be sufficient to transport consumers individually and/or as a group.
- service based within a HHS or is part of service network that also includes Level 5 or 6 child/adolescent acute inpatient mental health unit.
- as clinically indicated, ECT services may be facilitated and/or provided at this level of service by a mental health service authorised to provide ECT under the *Mental Health Act 2016*, and under care of registered medical specialist with credentials in psychiatry and certificate in child and adolescent psychiatry (or equivalent), and in accordance with the *Mental Health Act 2016*.
- mental health assessments and interventions are conducted by child and youth mental health clinicians of this service.
- additional mental health interventions may be directly provided by child and youth mental health clinicians using telehealth facilities, visiting and/or community-based workforce.

Workforce requirements

As per module overview, plus:

Medical

- admitted by / under registered medical specialist with credentials in psychiatry.
- access—24 hours—to registered medical specialist with credentials in psychiatry and certificate in child and adolescent psychiatry (or equivalent) for assessment, treatment, case management and case review.
- access to medical support.
- access to registered medical specialist with credentials in paediatrics for medical consultation-liaison (may be via telehealth).

Nursing

- suitably qualified and experienced registered nurse (however titled) in charge of unit.
- registered nurse in charge of each shift has qualifications and/or experience in mental health, and/or qualifications and/or experience in child/adolescent mental health.
- majority of unit nursing staff suitably qualified and experienced mental health professionals who may have postgraduate mental health qualifications.
- all nursing staff providing mental health care have access—during business hours—to registered nurse with extensive mental health experience and/or qualifications who can provide advice, support and direction for nursing care.

Allied health

	 access to multidisciplinary team of allied health professionals with qualifications and/or experience in child/adolescent mental health.
	 access to psychology, social work, occupational therapy, speech pathology, dietetic services and dedicated pharmacy services for mental health.
	Other
	• access to range of visiting or local health / mental health specialties and range of specialist children's health service providers.
	 may have program-based, qualified and registered teacher dedicated to mental health consumers.
	 AINs or equivalent may complement the clinical team at the discretion of the nurse in charge.
	 Bachelor of Nursing students (second or third year undergraduate) may complement the clinical team at the discretion of the nurse in charge and under registered nurse supervision.
	access to IPRA (public sector only).
Specific risk considerations	Nil

Support service requirements for child and youth non-acute inpatient mental health services

	Level 5	
	On-site	Accessible
Children's anaesthetic*	3	
Medical imaging		2
Medication	3	
Pathology		2

Perioperative (relevant sections)*

3

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

^{*}Required only in services where ECT performed

Section 3 Older Persons Services

Subsection 3.1 – Ambulatory Services

	Level 1	Level 2	Level 3	Level 4	Level 5	Level 6
Service description	 capable of providing short-term or intermittent non admitted mental health care to low risk/ complexity voluntary mental health consumers aged 65 and older. may only be available for limited hours. Delivered predominantly by one or more general health clinicians who provide local community healthcare service that is 	 capable of providing short-to medium term or intermittent non-admitted mental health care to low risk/complexity voluntary mental health consumers aged 65 and older. accessible during business hours. may be delivered via hospital-based outpatient clinic, community clinic or home-based care. delivered predominantly by team of 	 capable of providing short-to long-term or intermittent non admitted mental health care to low and moderate risk/complexity voluntary mental health consumers aged 65 and older. delivered predominantly by small team (not necessarily multidisciplinary) of mental health professionals who provide local adult mental health care service via hospital based 	 capable of providing short-to long-term or intermittent non admitted mental health care to low and moderate risk/complexity voluntary and, if authorised to do so, involuntary mental health consumers aged 65 and older. delivered predominantly by multidisciplinary team of mental health professionals who provide local adult mental health care service via 	 capable of providing short-to long-term or intermittent non admitted mental health care to low-, moderate-and high risk/complexity voluntary and involuntary mental health consumers who meet criteria to access care within designated older persons mental health service. accessible during business hours. delivered predominantly by 	 capable of providing short-to long-term or intermittent non admitted mental health care to highest risk/complexity voluntary and involuntary mental health consumers who meet criteria to access care within designated older persons mental health service. may be targeted population with special care needs and may demonstrate most extreme comorbidities and/or

- non-specific to mental health.
- typically, service delivered via a community clinic or home-based care.
- service provision typically includes: basic screening and assessment; brief and/or basic assessment and intervention; consumer and carer education; and referral, where appropriate.
- general health
 clinicians and
 visiting mental
 health
 professionals
 who provide
 local community
 healthcare
 service (general
 health clinicians
 providing mental
 health service

have

and/or

care).

some mental
health specific
services
/programs
provided at this
level.

qualifications

experience in

mental health

service provision
typically
includes:
assessment;
interventions,
including
counselling;
consumer and
carer education
and information;

- outpatient clinic or day program, community mental health clinic or homebased care.
- service provision typically includes: assessment and targeted interventions by mental health professionals; care coordination / case management; consumer and carer education and information; documented case review: consultationliaison with higher level mental health services; and referral, where appropriate.
- hospital-based outpatient clinic or day program, community mental health clinic or homebased care.
- service provision typically includes: multidisciplinary assessment and targeted interventions by mental health professionals: care coordination / case management; consumer and carer education and information; documented weekly case review; may provide group programs and prevention programs; consultationliaison with lower and higher level mental
- multidisciplinary team of older persons mental health professionals with qualifications and/or experience in older persons mental health who provide local mental health care service via hospital-based outpatient clinic, community mental health clinic, homebased care, or hospital- or communitybased day
- service provision typically includes: multidisciplinary assessment and targeted interventions by mental health

program.

- indicators of treatment resistance.
- delivered by highly specialised multidisciplinary team of older persons mental health professionals providing specialist mental health care service either locally and/or across service areas via hospital based outpatient clinic, community mental health clinic, homebased care or hospital or communitybased day program.
- service provision includes: multidisciplinary assessment and specialised interventions by

		documented case review; consultation-liaison with higher level mental health services; and referral, where appropriate.		health services; and referral, where appropriate.	professionals; care coordination/ case management; consumer and carer education and information; documented regular case review; consultation- liaison with lower and higher level mental health services; and referral, where appropriate.	mental health professionals; care coordination / case management; consumer and carer education; documented frequent case review; may provide targeted group programs; consultationliaison with lower level mental health services; extended-hours service; and referral, where appropriate.
Service requirements	As per module overview, plus: • identification, initial acute assessment and brief interventions of uncomplicated mental health problems.	As per Level 1, plus: • identification, initial acute assessment and interventions of mental health problems (that may be associated with simple comorbidities	As per Level 2, plus: • identification, ongoing assessment, monitoring and interventions of mental health problems (that may be associated with comorbidities	As per Level 3, plus: development of comprehensive individual mental health recovery plan within 1 week of assessment. extensive clinical detail	As per Level 4, plus: • identification, ongoing assessment, monitoring and interventions of mental health problems ranging in risk and complexity (that may be	As per Level 5, plus: • identification, ongoing assessment, monitoring and interventions of complex mental health problems (that may be associated with most complex

- forward referrals for expert assessment, diagnosis and intervention.
- development of care plan.
- basic clinical detail collected to inform assessment, diagnosis, intervention and recovery.
- Limited psychoeducation
- mental health
 assessments and
 interventions
 conducted in
 consultation
 with an older
 persons mental
 health clinician
 where clinically
 indicated, and
 associated with
 documented
 review process.
- mental health assessments and interventions (and referrals to

- and/or resistance to treatment).
- psychoeducation
 (including
 information
 about available
 mental health
 services, mental
 health problems
 and illnesses,
 indicated
 treatment
 options and
 support
 services).
- mental health
 assessments and
 interventions
 conducted by
 one or more
 general health
 clinicians with
 qualifications
 and/or
 experience in
 mental health
 and/or visiting
 mental health
 clinicians.

- and/or indicators of treatment resistance).
- integrated identification, assessment and intervention of any co-occurring substance-use disorders.
- development of individual mental health recovery plan.
- psychoeducation for patient and family / carer (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- mental health assessments and interventions

- collected to inform assessment, diagnosis, intervention and recovery.
- assertive outreach applicable to service and target population.
- mental health
 assessments and
 interventions
 conducted by
 team of mental
 health
 professionals
 based on service
 capacity.
- may be
 authorised
 mental health
 service under
 Mental Health
 Act 2016.

- associated with complex comorbidities and/or indicators of treatment resistance).
- facilitates access
 to targeted
 clinical
 programs for
 individuals /
 groups / families
 / carers (e.g.
 patients with
 dementia and
 associated
 complex
 behaviours).
- psychoeducation for patients, families / carers and groups (including information about available mental health services, mental health problems and illnesses, indicated treatment options and

- comorbidities and/or indicators of treatment resistance).
- extensive
 clinical detail
 collected to
 inform
 assessment,
 diagnosis,
 intervention and
 recovery, and
 broader service
 delivery across
 all levels of
 service.
- may have
 extensive range
 of primary (e.g.
 stress
 management),
 secondary (e.g.
 falls prevention)
 and tertiary (e.g.
 psychosis
 treatment
 maintenance)
 prevention
 services.
- statewide clinical forums to assist dissemination of

other mental health services) conducted by general health clinicians of this service.

 documented processes with Level 5 older persons acute inpatient mental health service. conducted by team (not necessarily multidisciplinary) of mental health clinicians.

- support services).
- mental health
 assessments and
 interventions
 conducted by
 multidisciplinary
 team of older
 persons mental
 health
 professionals
 with
 qualifications
 and/or
 experience in
 older persons
 mental health.
- service based within HHS or part of service network that includes Level 5 or 6 adult acute inpatient mental health unit.
- consultationliaison services to local health services as required.
- authorised mental health service under

- clinical expertise.
- specialist consultation and/or liaison to other health and non-health services / agencies for target population.
- services form part of integrated older persons mental health service, is based in HHS or are part of service network that also includes Level 5 or 6 older persons acute inpatient mental health unit, and has clear document processes with geriatric health services.
- may provide extensive range of additional clinical

					Mental Health Act 2016.	programs and service components, such as outreach service, telehealth services or extended treatment program.
Workforce requirements	As per module overview, plus access	As per Level 1, plus access to one or	As per Level 2, plus:	A per Level 3, plus:	As per Level 4, plus:	As per Level 5, plus:
	to one or more of following (visiting basis or outreach services): Medical • registered medical practitioner. Nursing • registered nurse. Allied health • allied health professionals. Other • access to IPRA (public sector only).	more of following qualified and/or experienced mental health professionals: Medical • registered medical practitioner. Nursing • registered nurse. Allied health professionals. Other • access to visiting mental health professionals.	 access to registered medical specialist with credentials in psychiatry for assessment, case management and review. Nursing access to two or more registered nurses-at least one with qualifications and/or experience in 	 access to registered medical specialist with credentials in psychiatry and qualifications and/or experience in geriatric psychiatry for assessment, case management and review. Nursing access—during business hours—to registered 	 access—during business hours—to registered medical specialist with credentials in psychiatry and qualifications and/or experience in geriatric psychiatry for assessment, case management and review. Nursing access—during business hours— 	 extended-hours access to registered medical specialist with credentials in psychiatry, and qualifications and experience in geriatric psychiatry for assessment, case management and review. extended-hours access to registered medical practitioner with

older persons mental health.

Allied health

 access to allied health professionals-at least one with qualifications and/or experience in older persons mental health.

Other

access to some visiting specialties in health and/or mental health. nurse with qualifications and/or experience in older persons mental health.

Allied health

 access—during business hours to multidisciplinary allied health professional team. to registered nurse with qualifications and/or extensive mental health experience who has qualifications and/or experience in older persons mental health.

Allied health

- access—during business hours to multidisciplinary team of allied health professionals with qualifications and/or experience in older persons mental health.
- access to
 psychology,
 social work,
 occupational
 therapy, speech

credentials in psychiatry (psychiatry registrar).

Nursing

extended-hours access to registered nurses with mental health qualifications and extensive experience in mental health including older persons mental health care.

Allied health

extended-hours
access to
multidisciplinary
team of allied
health
professionals
with mental
health
qualifications
and experience
in older persons
mental health,
some of who
have:

					pathology and dietetic services access to dedicated pharmacy services for mental health. Other access to range of visiting or local health / mental health specialties.	 demonstrat ed specialist qualificatio ns and experience in specific intervention areas relevant to service being provided - postgraduat e qualificatio ns. Other access to extensive range of visiting or local health / mental health specialties.
Specific risk considerations	Nil	Nil	Nil	Nil	Nil	Nil

Support service requirements for older persons ambulatory mental health services

	Level 1		Level 2		Level	Level 3 Level		Level 4		Level 5		6
	On- site	Accessible	On- site	Accessible	On- site	Accessible	On- site	Accessible	On- site	Accessible	On- site	Accessible
Medical imaging		1		1		1		2		2		2
Medication		1		2		2		2		3		4
Pathology		1		1		2		2		2		2

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

Subsection 3.2 – Older Persons Acute Inpatient Services

	Level 2	Level 3	Level 4	Level 5	Level 6
Service description	 capable of providing limited short-term or intermittent inpatient mental health care to lowrisk/complexity voluntary mental health consumers aged 65 and older. may manage involuntary inpatient for short periods 	 capable of providing short- to medium- term or intermittent inpatient mental health care to low- risk/complexity voluntary mental health consumers aged 65 and older 24 hours a day. delivered predominantly by 	capable of providing short- to medium-term and intermittent inpatient mental health care to low-and moderate-risk/complexity voluntary and, if authorised to do so, involuntary mental health consumers	capable of providing short- to medium-term and intermittent inpatient mental health care to low-, moderate- and highrisk/complexity voluntary and involuntary adult mental health consumers who meet	capable of providing short- to medium-term and intermittent inpatient mental health care to voluntary and involuntary mental health consumers who meet criteria to access care within designated older

- where authorised under *Mental Health Act 2016*.
- provides general healthcare and some limited mental health care 24 hours a day.
- delivered predominantly by team of general health clinicians within a facility without dedicated mental health staff (on-site) or allocated beds.
- service provision
 typically includes:
 assessment, brief
 interventions and
 monitoring;
 consumer and carer
 education and
 information;
 documented case
 review; consultation liaison with higher
 level mental health
 services; and
 referral, where
 appropriate.

- general and mental health professionals (on-site) within general medical facility with limited number of allocated mental health beds or may operate as mental health special care suite/area.
- service provision typically includes: assessment and targeted interventions by general and mental health professionals; consumer and carer education and information; documented case review; consultationliaison with higher level mental health services; and referral, where appropriate.

- aged 65 and older 24 hours a day.
- delivered
 predominantly by
 mental health
 professionals within
 dedicated mental
 health hospital or
 general hospital with
 dedicated mental
 health acute
 inpatient unit.
- service provision typically includes: multidisciplinary assessment and targeted interventions by mental health professionals: consumer and carer education and information; documented weekly case review: consultation-liaison with higher level mental health services: and referral, where appropriate.

- criteria to access care within designated older persons 24 hours a day.
- delivered
 predominantly by
 multidisciplinary
 team of older
 persons mental
 health professionals
 within dedicated
 mental health
 hospital or general
 hospital with
 dedicated mental
 health acute
 inpatient unit.
- has allocated beds for frail elder care and may have older persons mental health clinicians assigned to clinical team.
- service provision typically includes: multidisciplinary assessment and targeted interventions by mental health professionals; consumer and carer

- persons 24 hours a day, and presenting with highest level of risk and complexity.
- may be targeted population with special care needs.
- may demonstrate most extreme comorbidities and/or indicators of treatment resistance.
- forms part of integrated mental health service and based in HHS or part of service network that also includes Level 5 or 6 older persons ambulatory mental health service.
- is highly specialised and/or statewide inpatient service delivered from large general hospital incorporating a psychogeriatric unit or may be delivered from purposedesigned and built

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education and information; documented weekly case review; program access e.g. psychoeducation, symptom management and/or non-pharmacologic therapies; consultation-liaison with higher and lower level mental health services; and referral, where appropriate.

- mental health facility.
- demonstrates
 specialist expertise
 in delivery of mental
 health services to
 consumer group that
 cannot be safely and
 effectively cared for
 in any other level of
 acute inpatient
 mental health
 service.
- services delivered by highly specialised, multidisciplinary team of older persons mental health professionals.
- service provision includes:
 multidisciplinary assessment and specialised interventions by mental health professionals; consumer and carer education; documented daily case review; may provide targeted group programs; consultation-liaison

					with lower level mental health services; and referral, where appropriate.
Service requirements	As per module overview, plus: identification, initial acute assessment, brief intervention and monitoring of uncomplicated mental health problems. medication management. forward referrals for expert assessment, diagnosis and intervention. development of care plan. limited psychoeducation (including information about available mental health services, mental health problems and illnesses, indicated treatment options	 As per Level 2, plus: identification, acute assessment, brief intervention and monitoring of mental health problems (that may be associated with simple comorbidities and/or resistance to treatment). development of comprehensive individual mental health recovery plan within 1 week of assessment. psychoeducation (including information about available mental health services, mental health problems and illnesses, indicated treatment options 	 As per Level 3, plus: identification, ongoing assessment, monitoring and interventions of mental health problems (that may be associated with comorbidities and/or indicators of treatment resistance). integrated approach to identification, assessment and intervention of any co-occurring substance-use disorders. extensive clinical detail collected to inform assessment, diagnosis, intervention and recovery. psychoeducation for patient and family / 	 identification, ongoing assessment, monitoring and interventions of mental health problems ranging in risk and complexity (that may be associated with complex comorbidities and/or indicators of treatment resistance). supports access to targeted clinical programs for individuals / groups / families / carers (e.g. family/carers of patients with dementia and associated complex behaviours). mental health assessments, 	As per Level 5, plus: identification, ongoing assessment, monitoring and interventions of complex mental health problems (that may be associated with most complex comorbidities and/or indicators of treatment resistance). extensive clinical detail collected to inform assessment, diagnosis, intervention and recovery, and broader service delivery in all levels of service. may have extensive range of primary (e.g. stress management), secondary (e.g. falls

and support	
services).	

- mental health
 assessments and
 interventions
 conducted in
 consultation with
 older persons
 mental health
 clinician where
 clinically indicated,
 and associated with
 documented review
 process.
- mental health
 assessments and
 brief interventions
 and monitoring (and
 referrals to other
 mental health
 services) conducted
 by general health
 clinicians of this
 service.
- additional mental health interventions may be directly provided by mental health clinicians using telehealth facilities, visiting and/or communitybased workforce.

and support services).

- carer (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- documented processes and established collaborative partnerships with aged care services / agencies (e.g. Aged Care Assessment Teams).
- mental health
 assessments and
 interventions
 conducted by team
 of mental health
 professionals of this
 service.
- may be authorised mental health service under Mental Health Act 2016.
- as clinically indicated, ECT services may be

interventions and monitoring conducted by multidisciplinary team of mental health professionals.

- authorised mental health service under Mental Health Act 2016.
- may provide range of additional clinical programs and service components, such as telehealth services or a day program.

- prevention) and tertiary (e.g. psychosis treatment maintenance) prevention services.
- separate clinical services for families / carers, if required.
- specialist
 consultation and/or
 liaison to other
 health and non health services /
 agencies for target
 population.
- psychoeducation for consumers, families / carers and groups (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- may provide extensive range of additional clinical programs and service components,

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	documented processes with Level 5 older persons acute inpatient mental health service.		facilitated and/or provided at this service level by mental health service authorised to provide ECT under Mental Health Act 2016.		such as outreach services, telehealth services or day programs.
Workforce requirements	As per module overview, plus: Medical consumer admitted by registered medical practitioner. daily care coordinated by registered medical practitioner who has access to registered medical specialist with credentials in psychiatry to assist and guide assessment, treatment, case management and case review (may be via telehealth). medical services provided on-site or in close enough proximity to provide	As per Level 2, plus: Medical consumer admitted by / under registered medical specialist with credentials in psychiatry. daily care coordinated by registered medical specialist with credentials in psychiatry and/or registered medical practitioner who has access to registered medical specialist with credentials in psychiatry and qualifications and/or experience in older persons mental health to assist and guide assessment,	As per Level 3, plus: Medical access—24 hours—to registered medical specialist with credentials in psychiatry for assessment, treatment, case management and case review. Nursing registered nurse in charge of each shift is suitably qualified and experienced mental health professional. two or more registered nurses per shift qualified and experienced in mental health.	As per Level 4, plus: Medical consumer admitted by / under registered medical specialist with credentials in psychiatry (and qualifications and/or experience in psychogeriatric care preferable). access to registered medical specialist with credentials in geriatric health. Allied health access to psychology, social work, occupational therapy, speech pathology and dietetic services	As per Level 5, plus: Nursing • majority of registered nursing staff qualified mental health practitioners and have extensive mental health experience.

rapid response at all times.

Nursing

- suitably qualified and experienced registered nurse (however titled) in charge of unit.
- qualified and experienced registered nurse in charge of each shift with skills appropriate to service being provided.
- other suitably qualified nursing staff working within their scope of clinical practice.
- access—during business hours—to registered nurse with qualifications in mental health and/or extensive mental health experience who can provide advice, support and

treatment, case management and case review (may be via telehealth).

Nursing

 at least one registered nurse per shift with qualifications and/or experience in mental health.

Allied health

 access—during business hours—to community- or hospital-based allied health professionals with qualifications and/or experience in mental health. if inpatient unit occupancy is low, only one registered nurse per shift qualified and experienced in mental health.

Other

 access to some onsite and/or visiting specialties in health / mental health.

- (postgraduate training desirable).
- access to dedicated pharmacy services for mental health.

Other

access to extensive range of on-site and/or visiting specialties in health / mental health.

	direction for nursing care. Allied health access—during business hours—to allied health professionals.			
	Other			
	 AINs or equivalent may complement clinical team at discretion of nurse in charge. Bachelor of Nursing students (second or third year undergraduate) may complement clinical team at discretion of nurse in charge and under registered nurse supervision. access to IPRA (public sector only). 			
pecific risk pnsiderations	Nil	Nil	Nil	

Support service requirements for older persons acute inpatient mental health services

	Level 2	:	Level 3	:	Level 4		Level 5		Level 6	5
	On- site	Accessible								
Anaesthetics*					3		3		3	
Medical imaging		1		1		2		2		2
Medication	2		2		3		4		5	
Pathology		1		2		2		2		2
Perioperative (relevant section/s)*					3		3		3	

^{*}Required only if ECT performed

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach

Section 4 Statewide and Other targeted services

.Subsection 41 - Adult Forensic Services

Level 6

Service description

- provides highly specialised forensic mental health services to both ambulatory and acute inpatient adult mental health consumers presenting with moderate, high and highest risk/complexity, with acute inpatient components of this service providing acute inpatient mental health care 24 hours a day).
- delivered to members of targeted adult population diagnosed with serious mental illness and who have presented with serious and/or
 complex forensic issues (for some ambulatory services at this level of care, target population may extend to adults diagnosed with serious
 mental illness and at high risk of offending).
- delivered from a range of sites across the state; however, statewide coordination and governance of these services are centralised.
- ambulatory service components consist of:
 - Court Liaison Service, which provides mental health assessment, liaison, advice and referral for people in police custody and magistrates court environments, including diversion to appropriate mental health services, where appropriate
 - Prison Mental Health Services, which provide psychiatric assessment, treatment, management, discharge planning and transition support to people in custody
 - Community Forensic Outreach Service, which assists and builds capacity of integrated mental health services to assess and manage people who have mental illness and are involved in the criminal justice system, or are at high risk of committing an offence.
- Inpatient service component consists of:
 - high secure service, The Park Centre for Mental Health.
 - (Consumers referred to ambulatory components of this service present with problems ranging from moderate to high risk/complexity, some of whom may demonstrate most extreme comorbidities and/or indicators of treatment resistance).
- ambulatory mental health care is provided during service defined hours of business and includes: comprehensive multidisciplinary
 assessment, such as forensic and risk assessments; medico-legal reporting; targeted specialist interventions by mental health
 professionals; care coordination / case management; consumer and carer education; documented frequent case review; targeted group
 programs; all levels of prevention programs / services; consultation-liaison with lower level mental health services; and referral, where
 appropriate.

	 lower level services for adult forensic mental health consumers are delivered as part of core business associated with ambulatory, acute inpatient and non-acute inpatient services, as defined in the Adult Services and Older Persons Services sections of this module.
Service requirements	As per module overview, plus:
requirements	 acute inpatient service components are delivered across one or two sites statewide (from purpose-designed and built facilities) and provide targeted risk management strategies for designated population.
	 consumers meeting admission criteria for acute inpatient component of this service are unable to be adequately or safely cared for within their local inpatient mental health service and present with problems defined as the highest risk/complexity.
	 identification, ongoing assessment, monitoring and interventions of complex mental health problems (that may be associated with most complex comorbidities and/or indicators of treatment resistance).
	medication management.
	 extensive clinical detail collected to inform assessment / diagnosis / intervention / recovery, and broader service delivery in all levels of service.
	 extensive range of primary (e.g. stress management), secondary (e.g. weight management) and tertiary (e.g. psychosis treatment maintenance) prevention services.
	statewide clinical forums to assist dissemination of clinical expertise.
	 services delivered by highly specialised teams that provide mental health care to target population/s, some of whom present with special care needs.
	acute inpatient units are authorised mental health services under Mental Health Act 2016.
	• specialist mental health assessments and interventions conducted by mental health clinicians and health workers of this service.
	specialist consultation-liaison to other health and non-health services/agencies for target population.
	 clinicians providing mental health services participate in clinical practice supervision with clinician/s qualified and experienced in forensic mental health.
	 may provide extensive range of additional clinical programs and service components, such as an outreach service, telehealth services or an extended treatment program.
	 as clinically indicated, ECT services may be facilitated and/or provided at this level of service by a mental health service authorised to provide ECT under Mental Health Act 2016.
Workforce requirements	As per module overview, plus a Level 6 ambulatory service requires:

Medical

• access—during business hours—to registered medical specialist with credentials in psychiatry and relevant specialist qualifications and experience in forensic assessment, case management and review.

Nursing

• access—during business hours—to registered nurses with qualifications in mental health and/or extensive mental health experience in forensic assessment, case management and review.

Allied health

• access—during business hours—to multidisciplinary team of allied health professionals with qualifications and experience in forensic mental health, including pharmacy services for mental health.

Other

• access to extensive range of local health / mental health specialties (may be on a visiting basis or by outreach services).

A Level 6 inpatient service requires:

Medical

- consumer admitted by / under registered medical specialist with credentials in psychiatry.
- access—24 hours—to registered medical specialist with credentials in psychiatry and relevant specialist qualifications and experience in forensic assessment, treatment, case management and review.
- medical services provided on-site or are in close enough proximity to provide rapid response at all times.

Nursing

- suitably qualified and experienced registered nurse in charge (however titled) of unit.
- registered nurse in charge of each shift is suitably qualified and experienced mental health professional.
- majority of nursing staff on each shift have required qualifications and experience in mental health.

Allied health

- access to multidisciplinary team of allied health professionals with qualifications and experience in forensic mental health including psychology, social work, occupational therapy, speech pathology and dietetics (postgraduate training is desirable).
- access to dedicated pharmacy services for mental health.

	other				
	 access to extensive range of local health / mental health specialties (may be on a visiting basis or by outreach services). access to IPRA (public sector only). 				
Specific risk considerations	Nil				

Support service requirements for adult forensic mental health services

	Level 6			
	On-site	Accessible		
Anaesthetic*		3		
Medical imaging		3		
Medication		5		
Pathology		3		
Perioperative (relevant section/s)*		3		

^{*}Required only in services where ECT performed.

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

Subsection 4.2 Child and Youth Forensic Services

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Service description

- capable of providing short- to long-term or intermittent ambulatory mental health care to high-risk/complexity voluntary and involuntary mental health consumers involved in, or at risk of involvement in, the juvenile justice system.
- also provide consultation-liaison to range of government and non-government agencies, with aim of facilitating collaborative multiagency model of care.
- functions as part of integrated service that provides mental health care for target population within Youth Detention Centres, court liaison services and community forensic outreach services.
- accessible during business hours.
- delivered predominantly by multidisciplinary team of child and youth mental health professionals with qualifications and or/ experience in forensic mental health.
- service provision typically includes: multidisciplinary assessment such as forensic and risk assessments; medico-legal reporting; targeted
 clinical interventions by mental health professionals; care coordination/case management; consumer and carer education and
 information; documented frequent case review; primary prevention programs; consultation-liaison with higher level mental health
 services; and referral, where appropriate.

Note: Lower level services for child and youth forensic mental health consumers are delivered as part of core business associated with ambulatory, acute inpatient and non-acute inpatient services for children and adolescents, as defined in Child and Youth Mental Health Services section of this module.

Service requirements

As per module overview, plus:

- identification, ongoing assessment, monitoring and interventions of mental health problems ranging in risk and complexity (that may be associated with complex comorbidities and/or indicators of treatment resistance).
- integrated approach to identification, assessment and intervention of any co-occurring substance-use disorders.
- targeted clinical programs for individuals and/or groups.
- forward referrals for assessment / diagnosis / intervention as required.
- development of comprehensive individual mental health recovery plan within 1 week of assessment where appropriate.
- extensive clinical detail collected to inform assessment / diagnosis / intervention / recovery.
- assertive outreach to the service and target population.

• access to psychoeducation for consumers, families/carers and groups (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).

- specialist mental health assessments and interventions conducted by child and youth mental health clinicians and health workers of this service.
- documented processes and collaborative partnerships established with key stakeholders associated with criminal justice system—
 Department of Justice and Attorney General, Youth Detention Centres, Child Safety Services, and other stakeholders, including Department of Education, Training and Employment.
- working partnerships established with child and youth mental health and children's health services, Queensland Police Service, Queensland Corrective Services, and Department of Justice and Attorney-General.
- specialist consultation-liaison to other health and non-health services/agencies for target population.
- authorised mental health service under Mental Health Act 2016.
- may provide range of additional clinical programs and services such as outreach and telehealth services, extended treatment program.

Workforce requirements

As per module overview, plus:

Medical

- access—during business hours—to registered medical specialist with credentials in psychiatry, a certificate in child and adolescent psychiatry (or equivalent), and relevant specialist qualifications and/or experience in forensic assessment, case management and review.
- access—during business hours—to registered medical specialist with credentials in paediatrics for medical consultation-liaison (may be via telehealth).
- access—24 hours—to registered medical specialist with credentials in psychiatry.

Nursing

• access—during business hours—to registered nurse with qualifications in mental health and/or extensive mental health experience who has qualifications and/or experience in child and youth mental health and/or forensic mental health.

Allied health

- access—during business hours—to multidisciplinary team of allied health professionals with child and youth mental health and/or forensic mental health qualifications and/or experience.
- access to psychology, social work, occupational therapy, speech pathology, dietetic and dedicated pharmacy services for mental health.

Other

	 access to Indigenous Health Workers (where appropriate). access to range of local health / mental health specialties (may be on a visiting basis or by outreach services). access to IPRA (public sector only).
Specific risk considerations	Nil

Support service requirements for child and youth forensic mental health services

	Level 5	
	On-site	Accessible
Medical imaging		2
Medication		2
Pathology		2

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

.Subsection 4.3 - Deafness and Mental Health Services

	Level 6	
Service description	• highly specialised integrated service providing short term or intermittent mental health care to low-, moderate- and high-risk/complexity voluntary and involuntary adult mental health consumers via statewide consultation-liaison service.	′

• delivered to targeted adult population diagnosed with mental illness and who are deaf or have hearing loss, and some of whom have special care needs.

- delivered from range of sites across the state; however, statewide coordination of these services is centralised, with service accessible during business hours.
- service delivered by highly specialised team of mental health professionals with specialist qualifications and experience in deafness and mental health.
- service components consist of:
 - statewide consultation-liaison with Queensland Health and non-Queensland Health service providers
 - acute psychiatric assessments of mental health consumers (face-to-face and/or via telehealth facilities)
 - educational modules for skills transfer to service providers
 - specialised consultation-liaison services for special needs groups (e.g. Aboriginal and Torres Strait Islander people who are deaf).
- service provision typically includes: assessment and targeted interventions by mental health professionals; consumer and carer education and information; primary and secondary prevention programs; consultation-liaison with other service providers; and referral, where appropriate.

Service requirements

As per module overview, plus:

- identification, ongoing assessment, monitoring and interventions of mental health problems ranging in risk and complexity (that may be associated with complex comorbidities and/or indicators of treatment resistance).
- integrated approach to identification, assessment and intervention of any co-occurring substance-use disorders.
- targeted clinical programs for individuals / groups / families.
- forward referrals for assessment, diagnosis and intervention as required.
- input into development of comprehensive and individual mental health recovery plan within 1 week of assessment.
- extensive clinical detail collected to inform assessment, diagnosis, intervention, recovery and broader service delivery in all service levels.
- facilitation of access to range of primary and secondary prevention services.
- assertive outreach applicable to service and target population.
- statewide clinical forums to assist dissemination of clinical expertise.
- psychoeducation for consumers, families / carers and groups (including information about available mental health problems and illnesses, indicated treatment options and support services).

	 separate clinical services for families / carers, if required. as consultation service, primary clinical responsibility and decision-making for consumer remains with referring service. statewide specialist consultation-liaison to other health and non-health services / agencies for people who are deaf or hard of hearing. mental health assessments and interventions conducted in accordance with Queensland Health guidelines for working with consumers who are deaf or hard of hearing. assistance, support and resources provided to referring mental health service to ensure appropriate recovery plan is prepared and reviewed for each consumer.
	authorised service under Mental Health Act 2016.
Workforce requirements	As per module overview, plus: Medical
	 access—during business hours—to registered medical specialist with credentials in psychiatry for assessment, case management and review.
	Nursing
	• access—during business hours—to registered nurse with qualifications in mental health and/or extensive mental health experience.
	Allied health
	• access—during business hours—to allied health professionals with qualifications and experience in mental health.
	Other
	 consultation available from range of specialist services, particularly related to people who are deaf and as such identify as a cultural and linguistic minority, as well as to those with marked hearing loss. access to IPRA (public sector only).
Specific risk considerations	Nil

Support service requirements for deafness and mental health services

	Level 6		
	On-site	Accessible	
Medication		2	
Medical imaging		3	
Pathology		3	

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

Subsection 4.4 – Eating disorders service

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Service description

- provides specialist resources and support enabling mental health ambulatory and acute inpatient care services 24/7^{-3, 4}
- integrated service delivered to targeted adult population diagnosed with (or at high risk of developing) serious and/or complex eating disorders.
- provides acute ambulatory and inpatient mental health care to voluntary and involuntary adult mental health consumers with an eating disorder who present with problems ranging from low to highest risk/complexity, and may have special care needs.
- adolescent consumers older than 14 years may access this service, where clinically and developmentally appropriate, and in line with policy and procedural documentation of the eating disorders service.
- services may be delivered from a range of sites across the state; however, this service is centrally coordinated.
- ambulatory service components may include statewide consultation-liaison service, outpatient assessment and treatment recognition services, specialist outpatient therapy and/or intensive outpatient program (consumers referred to ambulatory service components

present with problems ranging from low to highest risk/complexity, some of whom may demonstrate most extreme comorbidities and/or indicators of treatment resistance).

- acute inpatient service components at this level are co-located with a Level 5 or 6 adult acute inpatient mental health service (consumers meeting admission criteria for acute inpatient component present with problems defined as highest risk/complexity and these consumers are unable to be adequately or safely cared for within their local acute inpatient mental health service).
- service provision includes: comprehensive multidisciplinary assessment; targeted specialist interventions by mental health and medical health professionals; care coordination; consumers and carer education; documented frequent case review; targeted group programs; all levels of prevention programs / services; consultation-liaison with lower level mental health services; and referral, where appropriate.
- lower level services for mental health consumers with an eating disorder are delivered as part of core business associated with ambulatory, acute inpatient and non-acute inpatient services-these service areas are defined in the Child and Youth Services, Adult Services and Older Persons Services sections of this module.

Service requirements

As per module overview, plus:

- authorised service under Mental Health Act 2016.
- identification, ongoing assessment, monitoring and interventions of complex mental health problems (that may be associated with most complex comorbidities and/or indicators of treatment resistance).
- integrated approach to identification, assessment and intervention of any co-occurring substance-use disorders.
- targeted clinical programs for individuals / groups / families / carers.
- · medication management.
- forward referrals for assessment / diagnosis / intervention as required.
- development of comprehensive individual mental health recovery plan within 1 week of assessment.
- referral to community mental health clinicians on hospital discharge, as appropriate.
- extensive range of primary (e.g. stress management), secondary (e.g. re-feeding syndrome) and tertiary (e.g. treatment maintenance) prevention services.
- psychoeducation for consumers, families/carers and groups (including information about available mental health problems and illnesses, indicated treatment options and support services).
- separate clinical services for families / carers, if required.
- specialist mental health assessments / interventions conducted by clinicians of this service.
- specialist consultation-liaison to other health and non-health services / agencies for target population.

- current policy and procedure documentation informs the processes of consultation-liaison with lower level services who provide an eating disorders mental health service.
- documented processes and collaborative partnerships with key stakeholders associated with eating disorder treatment, research and education (e.g. Eating Disorders Association).
- clinicians providing mental health services participate in clinical practice supervision with clinician/s qualified and experienced in eating disorders and mental health.
- may provide extensive range of additional clinical programs and service components, such as an outreach service, telehealth services or a day program.
- as clinically indicated, ECT services may be facilitated and/or provided by mental health service authorised to provide ECT under *Mental Health Act* 2016.
- statewide clinical forums to assist dissemination of clinical expertise.
- extensive clinical detail collected to inform assessment / diagnosis / intervention / recovery and broader service delivery in all levels of service.

Workforce requirements

As per module overview, plus:

• delivered by multidisciplinary team of highly specialised clinicians / mental health professionals.

A Level 6 ambulatory service requires:

Medical

• access—during business hours—to registered medical specialist with credentials in psychiatry and specialist qualifications and experience in eating disorders assessment, case management and review.

Nursing

• access—during business hours—to registered nurses (with qualifications in mental health and/or extensive mental health experience) relevant to the service being provided.

Allied health

- access—during business hours—to multidisciplinary team of allied health professionals with qualifications and experience in eating disorders and mental health.
- access to dedicated pharmacy services for mental health.

Other access to an extensive range of visiting or local health / mental health specialties. A **Level 6 inpatient** service requires: Medical consumer admitted by / under registered medical specialist with credentials in psychiatry. access—24 hours—to registered medical specialist with credentials in psychiatry and specialist qualification and experience in eating disorders assessment, treatment, case management and review. access—24 hours—to registered medical practitioner (psychiatry registrar / principal house officer / senior medical officer / career medical officer) with credentials relevant to the discipline. medical services provided on-site or in close enough proximity to provide rapid response at all times. Nursing suitably qualified and experienced nurse in charge (however titled) of unit. registered nurse in charge of each shift with qualifications in mental health and/or extensive mental health experience. nursing staff on each shift, two or more of whom have qualifications in mental health and/or extensive mental health experience. Allied health access to, multidisciplinary team of allied health professionals with qualifications and experience in eating disorders and mental health (postgraduate training desirable). access after-hours to generalist psychology, social work and dietetic services. access to dedicated pharmacy services for mental health. Other access to extensive range of visiting or local health / mental health specialties. access to IPRA (public sector only). **Specific risk** Nil considerations

Support service requirements for eating disorders services

	Level 6		
	On-site	Accessible	
Anaesthetic*	3		
Medical imaging		2	
Medication		4	
Pathology		3	
Perioperative (relevant section/s)*	3		

^{*}Required only in services where ECT performed

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

.Subsection 4.5 – Emergency services

	Level 4	Level 5
Service description	 capable of providing 24 hours a day short-term emergency mental health treatment and care for low- to high- risk/complexity voluntary, and if authorised to do so, involuntary mental health consumers (across age spectrum) who present to emergency service and are triaged as having mental health problem / disorder associated with their current presentation. 	 delivered on-site with Level 5 or Level 6 acute inpatient mental health service and provides initial triage, treatment and definitive care for majority of emergency presentations before retrieval by medical practitioners and/or other qualified staff. provided predominantly by mental health professionals within general hospital.

• service provided predominantly by general health clinicians within general hospital.

- local mental health service (may be community- or hospitalbased) provides consultation-liaison service to emergency department as required.
- service provision typically includes: assessment and brief treatment of acute mental health problems and illnesses; and stabilisation of emergencies before onward referral or retrieval by medical practitioners and/or other qualified staff.
- triage conducted by general health clinicians of emergency department and further mental health assessments / interventions then conducted by mental health clinicians assigned to emergency department.
- mental health clinicians stationed within emergency department at least during business hours (one example of service model delivered at this level of service is Psychiatric Emergency Centre or equivalent).

Service requirements

As per module overview, plus:

- identification, initial acute assessment, brief intervention, monitoring and stabilisation of mental health problems.
- medication review and management.
- forward referrals for expert assessment, diagnosis and intervention as required.
- basic clinical detail collected to inform assessment, diagnosis, intervention and recovery.
- limited psychoeducation (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- level of consumer observation informed by triage category and individual risk assessment.
- mental health assessments, interventions and monitoring conducted by team of general and mental health (as required) professionals reflecting triage rating.
- mental health assessments and interventions conducted in consultation with mental health clinician where clinically indicated, and associated with documented review process.
- clinical staff providing mental health care have access—during business hours—to experienced mental health clinician who is

As per Level 4, plus:

- assessment and brief treatment of acute mental health problems and illnesses, and stabilisation of emergencies before onward referral or retrieval by medical practitioners and/or other qualified staff.
- integrated approach to identification, assessment and preliminary intervention of any co-occurring substance-use disorders.
- psychoeducation (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- mental health assessments, interventions and monitoring conducted by multidisciplinary team of mental health professionals assigned to emergency department (at least on during business hours).
- one mental health clinician (assigned to emergency department per shift) is authorised mental health practitioner.
- mental health Acute Care Team and/or consultation-liaison service provides extended-hours service and has documented processes and collaborative partnership with emergency department.

	 authorised mental health practitioner and can provide advice, support and direction for care. consultation-liaison mental health service from on-site and/or community-based mental health service as required. additional mental health assessments and interventions may be directly provided by mental health clinicians using telehealth facilities, visiting and/or community-based workforce. may provide short-stay inpatient unit/area; however, there are no designated mental health beds or mental health clinicians associated with this short-stay unit / area. may be authorised service under Mental Health Act 2016. 	 documented processes with Level 5 or 6 acute inpatient mental health service. current policy and procedure informs documented processes and collaborative partnerships between this service and all other mental health services within same HHS or service area. documented processes and collaborative partnerships established between emergency department and integrated mental health service, as evidenced by regular minuted meetings—copy of minutes should be forwarded to emergency department and lead clinician/s responsible for governance of Emergency Mental Health. designated mental health area within emergency department, but this does not necessarily have designated mental health beds. if clinically indicated, consumers younger than 18 years reviewed by registered medical specialist with credentials in psychiatry and certificate in child and adolescent psychiatry (or equivalent) or their delegated registered medical practitioner in psychiatry under supervision (e.g. psychiatric registrar) within 48 hours of initial psychiatric assessment. registered medical specialist with credentials in psychiatry reviews health records of all mental health consumer separations within 24 hours. is authorised mental health service under Mental Health Act 2016. may be delivered by emergency department-based Acute Care Teams (or their equivalent). may provide short-stay medical inpatient beds and mental health clinicians may provide direct care of mental health consumers admitted to these beds (as required/negotiated).
Workforce requirements	As per module overview, plus:	As per Level 4, plus:

	Medical	Medical
	 access to registered medical practitioner medical services provided on-site or in close enough proximity to provide rapid response at all times. 	 extended-hours access to registered medical specialist with credentials in psychiatry for assessment, treatment, case management and case review.
	Nursing	 access—24 hours—to registered medical practitioner.
	registered nurses.	Nursing
	Allied health	 extended-hours access to registered nurses, majority with qualifications in mental health and/or extensive mental health
	 access—during business hours—to community- or hospital-based 	experience.
	allied health professionals with mental health qualifications and/or experience.	Allied health
	Other	 extended-hours access to community- or hospital-based allied health professionals with qualifications and/or experience in
	 access to IPRA (public sector only). 	mental health care.
		Other
		 access to a range of visiting or local health / mental health specialties.
Specific risk considerations	Nil	Nil

Support service requirements for emergency mental health services

	Level 4		Level 5	
	On-site	Accessible	On-site	Accessible
Emergency	4		5	

Medical imaging		3		3
Medication	5		5	
Pathology		3		3

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

.Subsection 4.6 - Evolve therapeutic service

	Level 4	Level 5
Service description	 capable of providing medium- to long-term ambulatory mental health care for targeted population of voluntary and involuntary mental health consumers (up to age of 18 years) presenting with high-risk/complexity psychological and behavioural support and special care needs and/or indicators of treatment resistance. all referrals are of those children and young people in care of Department of Communities (Child Safety Services). service provided in partnership with Department of Communities-(Child Safety Services) and (Disability Services), and Department of Education, Training and Employment with service accessible during business hours. service delivered by one or more child and youth mental health professionals (nurses, allied health) who provide specialised mental health care services, and who work in consultation with Level 5 Evolve Therapeutic Service which acts as central base for activity and plays support and coordination role to satellite services. service provision typically includes: assessment; therapeutic and systemic intervention; care coordination / case management; 	 capable of providing medium- to long-term mental health care for targeted population of voluntary and involuntary mental health consumers (up to age of 18 years) presenting with highest risk/complexity psychological and behavioural support and special care needs, demonstrating most severe comorbidities and/or indicators of treatment resistance. all referrals are of those children and young people in care of Department of Communities (Child Safety Services). service provided in partnership with Department of Communities-(Child Safety Services) and (Disability Services), and Department of Education, Training and Employment. service delivered by multidisciplinary team of mental health professionals with qualifications and/or experience in child and youth mental health. service provision typically includes: assessment; therapeutic and systemic intervention; care coordination / case management; consumer and carer education and information; documented frequent case review; all levels of prevention programs; consultation-liaison with lower and higher level mental health

consumer and carer education and information; documented services, and lower level Evolve Therapeutic Services; and frequent case review; primary and secondary prevention referral, where appropriate. programs; consultation-liaison with lower and higher level mental health services, and Level 5 Evolve Therapeutic Service; and referral, where appropriate. Service As per module overview, plus: As per Level 4, plus: requirements identification, ongoing assessment, monitoring and interventions targeted clinical programs for individuals / groups / families / of mental health problems ranging in risk and complexity (that carers. may be associated with comorbidities and/or indicators of clinical detail collected to inform assessment / diagnosis / treatment resistance). intervention / recovery, and broader service delivery in all levels integrated approach to identification, assessment and of service. intervention of any co-occurring substance-use disorders. extensive range of primary, secondary and tertiary prevention some targeted clinical programs for individuals / groups / services, as clinically indicated. families / carers. mental health assessment / intervention conducted by comprehensive multidisciplinary team of mental health forward referrals for assessment / diagnosis / intervention as clinicians. required. development of comprehensive individual mental health current policy and procedure documentation informs processes of consultation-liaison with lower level Evolve services. recovery plan within 1 week of completed assessment report. clinical detail collected to inform assessment / diagnosis / may be an authorised mental health service under Mental Health intervention / recovery. Act 2016. range of primary, secondary and tertiary prevention services, as clinically indicated. specialist consultation-liaison with other health and non-health services / agencies for the target population. assertive outreach applicable to service and target population. psychoeducation for consumers, families/carers and groups (including information about available mental health services. mental health problems and illnesses, indicated treatment options and support services). separate clinical services for families/carers, if required.

mental health assessments / interventions conducted by child and youth mental health clinicians of this service.

- mental health assessments / interventions demonstrate multiple theoretical underpinnings.
- this service works in partnership with local/nearest child and youth mental health service.
- weekly consultation-liaison session between staff of spoke site and credentialed child and adolescent psychiatrist from hub site (may be via telehealth) as appropriate.
- effective corporate and clinical governance structures and communication strategies promoting and supporting integration between hub and spoke sites.
- documented processes and collaborative partnerships established with other relevant government departments.
- authorised service under Mental Health Act 2016.

Workforce requirements

As per module overview, plus:

Medical

- registered medical specialist with credentials in psychiatry and a
 certificate in child and adolescent psychiatry (or equivalent)
 conducts clinical / case supervision with service clinicians (this
 may be via telehealth facilities) as appropriate.
- registered medical specialist with credentials in psychiatry and certificate in child and adolescent psychiatry (or equivalent) attends / consults on all clinical review meetings on regular basis (this may be via videoconference) as appropriate.
- access to registered medical specialist with credentials in psychiatry and certificate in child and adolescent psychiatry (or equivalent) for assessment, case management and review (this may be via telehealth facilities) as appropriate.

As per Level 4, plus:

Medical

• access to registered medical practitioner with credentials in psychiatry (psychiatry registrar).

Nursing

 access—during business hours—to registered nurses with qualifications in mental health and/or extensive mental health experience and/or qualifications and experience in child and youth mental health.

Allied health

 access to multidisciplinary team of allied health professionals with child and youth mental health qualifications and/or experience.

	 Nursing access—during business hours—to at least one registered nurse with relevant specialist child and youth mental health qualifications and/or experience (postgraduate training desirable). Allied health access—during business hours—to an allied health professional with relevant specialist child and youth mental health qualifications and/or experience (where registered nurse not accessible). Other access to Aboriginal and Torres Strait Islander mental health worker / senior health worker, service and evaluation research 	 some of these clinicians have: specialist qualifications and/or experience in specific intervention areas relevant to service being provided postgraduate qualifications. Other access to range of visiting or local health / mental health specialties.
Specific risk considerations	coordinator, and professional development coordinator. • access to IPRA (public sector only). Nil	Nil

Support service requirements for evolve therapeutic services

	Level 4		Level 5	
	On-site	Accessible	On-site	Accessible
Medical imaging		2		2

Medication	3	3
Pathology	2	3

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

.Subsection 4.7 - Homeless health outreach service

	Level 5
Service description	 capable of providing short- to long-term or intermittent non-admitted mental health care to low-, moderate- and high-risk/complexity voluntary and involuntary mental health consumers across age spectrum who have been displaced or are homeless, and who have difficulty in accessing other services. extended-hours weekday service and/or limited-hours weekend mental health care service. delivered predominantly by multidisciplinary team of general, mental health, and drug and alcohol professionals (psychiatry, medical, nursing, allied health and other health workers) on assertive outreach basis, either at dedicated homeless services or on the streets ('in place') to homeless people who are experiencing mental illness and/or drug and alcohol problems. services provision typically includes: multidisciplinary assessment and targeted interventions by mental health professionals; care coordination / case management; consumer and carer education and information; documented frequent case review; primary and secondary prevention programs; consultation-liaison with lower and higher level mental health services; and referral, where appropriate.
Service requirements	As per module overview, plus: care to low-, moderate- and high-risk/complexity voluntary and involuntary mental health consumers across age spectrum who have been displaced or are homeless, and who have difficulty in accessing other services. identification, ongoing assessment, monitoring and interventions of mental health problems ranging in risk and complexity (that may be associated with complex comorbidities and/or indicators of treatment resistance). integrated approach to the identification, assessment and intervention of any co-occurring substance-use disorders. forward referrals for assessment / diagnosis / intervention as required. development of comprehensive individual mental health recovery plan within 1 week of assessment.

- extensive clinical detail collected to inform assessment / diagnosis / intervention / recovery.
- extensive range of primary (e.g. stress management) and secondary (e.g. weight management) prevention services.
- assertive outreach applicable to service and target population.
- psychoeducation for consumers, families / carers and groups (including information about available mental health problems and illnesses, indicated treatment options and support services).
- authorised mental health service under Mental Health Act 2016.
- Assessments / interventions conducted by multidisciplinary team of general, mental health, and drug and alcohol professionals.
- service provision takes place in consumer's own environment or at other sites (e.g. hospital, recreational venues) ensuring all safety concerns are taken into account.
- consultation-liaison services to local health services as required.
- service works in partnership with mental health services and non-government specialist providers.
- documented processes and collaborative partnerships with key stakeholders relevant to homeless health (e.g. Department of Communities and non-government organisations providing shelter / refuge / food).

Workforce requirements

As per module overview, plus multidisciplinary team of general, mental health, and drug and alcohol professionals, including:

- drug and alcohol clinicians may be part of the integrated team.
- access to experienced and qualified age-appropriate clinical staff.

Medical

• access—during business hours—to registered medical specialist with credentials in psychiatry for assessment, case management and review.

Nursing

• access—during business hours and some extended-hours—to registered nurse with qualifications in mental health and/or extensive mental health experience.

Allied health

• access—during business hours and some extended hours—to multidisciplinary team of allied health professionals with qualifications and/or experience in mental health.

Other

	 each team has minimum of two Aboriginal and Torres Strait Islander health workers, male and female, to ensure appropriate gender-specific and cultural requirements are met. access to extensive range of visiting or local health / mental health specialties. access to IPRA (public sector only).
Specific risk considerations	Nil

Support service requirements for homeless health outreach services

	Level 5		
	On-site	Accessible	
Medication		2	
Medical imaging		1	
Pathology		1	

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

Subsection 4.8 – Perinatal and infant services

Level 3		Level 4	Level 5	Level 6	
Service	 capable of providing short-	• capable of providing short-	• capable of providing short-	 capable of providing short-	
description	to long-term or intermittent	term acute inpatient mental	to medium-term or	to medium-term and	

- ambulatory mental health care for voluntary and involuntary mental health consumers (and their infants) presenting with low, moderate- and some high-risk/complexity perinatal-and/or infant-related mental health problems.
- accessible during business hours with some capacity for extended-hours service.
- timeframe for ambulatory perinatal mental health service delivery ranges from preconception to child's second birthday (24 months) women in perinatal period experiencing moderate to severe mental health difficulties requiring mental health assessment may access range of mental health perinatal services, as can women who have had miscarriage, stillbirth, neonatal death or termination.
- expected majority of consumers are female; however, some fathers may

- health care for voluntary and involuntary mental health consumers (and their infants) presenting with low risk/complexity perinataland/or infant-related mental health problems.
- may be provided for mothers and their infants when admission to nominated adult acute inpatient unit is most clinically appropriate and safe service for the individual case, and when transfer to higher level perinatal and infant mental health inpatient service is not feasible or clinically necessary.
- provide inpatient mental health care for mothers and their infants (from third trimester of pregnancy until infant becomes mobile) where mother exhibits signs and/or symptoms of serious mental illness that have not responded adequately to less intensive interventions in the community, and/or safety and treatment needs of dyad/family warrant admission.

- intermittent acute inpatient mental health care for voluntary and involuntary mental health consumers (and their infants) presenting with low-, moderate- and high-risk/complexity perinatal-and/or infant-related mental health problems.
- service delivered as one component of Level 5 or Level 6 adult acute inpatient mental health unit that comprises limited number of designated mother-infant beds and provides mental health care 24 hours a day.
- delivered predominantly by multidisciplinary team of mental health professionals providing acute inpatient mental health service.
- delivered via a hospital that incorporates an acute inpatient mental health unit or via purpose-designed and built mental health facility.
- service provision typically includes: multidisciplinary assessment and targeted interventions by mental

- intermittent inpatient perinatal and/or infant mental health care to voluntary and involuntary mental health consumers (and their infants) presenting with highest level of risk and complexity, and special care needs (consumers presenting with low to moderate risk and/or complexity can be admitted to this level of service as is clinically appropriate and relevant to individual consumer needs).
- provides care 24 hours a day.
- highly specialised statewide inpatient service delivered via dedicated mother-infant mental health unit colocated with Level 5 or 6 acute inpatient mental health unit.
- provides inpatient care to parents and their infants (from preconception to 36 months—upper age limit will depend on physical environment of the service) where mother exhibits signs and/or symptoms of serious mental illness at severe end

- access range of perinatal mental health services.
- timeframe for ambulatory infant mental health service delivery ranges from preconception to child's third birthday (36 months) infants with severe and complex needs presenting with social, emotional and behavioural difficulties and developmental delays, often in context of trauma or compromised parent-infant relationships, may access range of infant mental health services.
- delivered predominantly by multidisciplinary team of mental health professionals who provide local, community mental health care service specifically for target population.
- most commonly delivered via hospital-based outpatient clinic, community mental health clinic or home-based care.
- service provision typically includes: multidisciplinary assessment and targeted

- infants will only be admitted
 if it can be clearly
 determined during
 assessment mother is
 capable of caring
 independently (with support
 of staff as required) for the
 infant in a safe manner.
- delivered predominantly by multidisciplinary team of mental health professionals 24 hours a day in an adult acute inpatient mental health service without allocated mother-infant beds.
- service may operate on demand and is delivered via a hospital that incorporates an acute inpatient mental health unit or via purposedesigned and built mental health facility.
- service provision typically includes: multidisciplinary assessment and targeted interventions by mental health professionals; care coordination / case management; consumer and carer education and information; documented frequent case review; primary and some

health professionals; care coordination / case management; consumer and carer education and information; documented frequent case review; group programs; primary and secondary prevention programs; consultation-liaison with higher level mental health services; and referral, where appropriate.

Note: Lower level services for inpatients presenting with perinatal and/or infant-related mental health problems delivered as part of core business associated with acute inpatient mental health services, as defined in the Child and Youth Services and Adult Services sections of this module.

- of spectrum that have not responded adequately to less intensive interventions in the community, and/or safety and treatment needs of dyad/family warrant admission.
- on occasion, mother may be admitted in third trimester of pregnancy.
- father may rarely be admitted in his own right, along with his infant.
- offers assessment and intervention for range of perinatal and infant mental health disorders and relationship disturbances at highest level of risk and complexity, especially those that require admission of several family members.
- may include most complex cases where there is combination of mental illness, personality disorder, substance abuse, infant distress or disorder, and child safety concerns.
- service demonstrates specialist expertise in delivery of perinatal and infant mental health

interventions by mental health professionals; care coordination / case management; consumer and carer education and information; documented regular case review; some group programs; primary and secondary prevention programs; consultation-liaison with higher level mental health services; and referral, where appropriate.

where members of this
 population of mental health
 consumers are pregnant or
 within birth and early
 postnatal period,
 consultation and liaison
 must occur with maternity
 health professionals (e.g.
 registered nurses with
 credentials in midwifery and
 registered medical
 specialists with credentials
 in obstetrics, children's
 and/or neonatology).

Note: Lower level services for ambulatory consumers presenting with perinatal and/or infant mental health problems are delivered as part of core business associated with ambulatory mental health services, as defined in the Child and Youth secondary prevention programs; consultationliaison with higher level mental health services; and referral, where appropriate.

Note: Lower level services for inpatients presenting with perinatal and/or infant-related mental health problems delivered as part of core business associated with acute inpatient mental health services, as defined in the Child and Youth Services and Adult Services sections of this module. For an adult acute inpatient unit to admit infants with their mothers, service is required to meet criteria stipulated in this section, Subsection 4.3, Perinatal and Infant Services (Level 4 or higher).

- services to targeted population and is delivered by multidisciplinary team of mental health professionals with expertise in perinatal and/or infant mental health.
- service provision includes:
 multidisciplinary
 assessment and specialised
 interventions by mental
 health professionals;
 consumer and carer
 education; documented
 daily case review; targeted
 group programs; all levels of
 prevention
 programs/services;
 consultation-liaison with
 lower level mental health
 services; and referral, where
 appropriate.
- if physical environment permits, this service can operate as parent-infant inpatient service with physical layout designed to safely meet needs of older infants and their families, including family rooms and outdoor play spaces (allowing for admission of infants up to age of 36 months as well as sibling groups where all are

Services and Adult Services sections of this module.	younger than 36 months at time of admission).
As per module overview, plus: identification, ongoing assessment, monitoring and interventions of mental health problems (that may be associated with comorbidities and/or indicators of treatment resistance). integrated approach to identification, assessment and intervention of any co-occurring substance-use disorders. forward referrals for assessment, diagnosis and/or intervention as required. clinical detail collected to inform assessment, diagnosis, intervention and recovery. development of comprehensive individual mental health recovery plan within 1 week of assessment. range of primary (e.g. stress management) and some secondary (e.g. mother infant therapy) prevention services. wide range of primary (e.g. stress management) and some secondary (e.g. mother infant therapy) prevention services. wide range of primary (e.g. stress management) and some secondary (e.g. mother infant deficit on first and interventions of mental health defined with mother, following requirements are to be met: consultation-liaison initiated immediately and maintained with higher level perinatal and infant mental health service throughout the admission mother and infant provided with single, ensuite room that must have clear observation paths for nursing staff at all times and is within close proximity to nursing stafion (room should be able to be locked from outside and be key accessible only by nursing staff) range of primary (e.g. stress management) and secondary (e.g. mother on the total collected to inform assessment. infant monitoring and interventions of mental health recovery plan within nure with mother, following requirements are to be met: consultation-liaison initiated immediately and maintained with higher level perinatal and infant mental health recovery plan within close proximity to nursing staff at all times and is within close proximity to nursing staff at all times and is within close proximity to nursing staff at all times and is within close proximity to nursing staff at all times and is within close	As per Level 5, plus: identification, ongoing assessment, monitoring and interventions of complex mental health problems (that may be associated with most complex comorbidities and/or indicators of treatment resistance). extensive clinical detail collected to inform assessment, diagnosis, intervention and recovery, and broader service delivery in all levels of service. extensive range of primary (e.g. stress management), secondary (e.g. mother infant therapy) and tertiary (e.g. psychosis treatment maintenance) prevention services. statewide clinical forums to assist dissemination of clinical expertise. specialist mental health assessments and interventions conducted by multidisciplinary team of

- infant therapy) prevention services.
- psychoeducation for consumers and family/carer (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- may be authorised mental health service under Mental Health Act 2016.
- policy—supporting
 multidisciplinary approach
 to pregnancy, birth and
 early postnatal care—is in
 place for women who are
 planning pregnancy or who
 are pregnant, outlining
 communication channels
 between mental health and
 maternity teams.
- policy outlining communication channels between mental health and maternity carers is in place where pregnant women are receiving care at this service level.
- where appropriate, documentation of care is

mobile, in use at all times in order for infant's wellbeing to be monitored.

- and groups (including information about available mental health services, mental health problems and illnesses, indicated treatment options and support services).
- separate clinical services for families/carers, if required.
- consultation-liaison services to local health services as required.
- clinicians providing mental health services participate in clinical practice supervision with clinician/s qualified and/or experienced in perinatal and infant mental health.
- mental health assessments and interventions conducted by multidisciplinary team of mental health professionals.
- authorised mental health service under Mental Health Act 2016.
- as clinically indicated, ECT services may be facilitated and/or provided to an adult by mental health service authorised to provide ECT

- mental health professionals with specialist qualifications and experience in perinatal and/or infant mental health.
- specialist consultationliaison to other health and non-health services / agencies for target population.

	contained within pregnancy handheld record to promote communication and information between the woman and mental health and maternity care teams. documented processes with Level 5 or 6 acute inpatient mental health service (child and youth, adult and/or perinatal and infant) capable of perinatal and infant mental health care. service based within HHS or part of service network that also includes Level 5 or 6 acute inpatient mental health unit (child and youth, adult and/or perinatal and infant) capable of perinatal and infant mental health care. mental health assessments and interventions conducted by mental health clinicians of this service.		under Mental Health Act 2016.	
Workforce requirements	As per module overview, plus: Medical access to registered medical specialist with credentials in psychiatry (with training /	As per Level 3, plus: Medical consumer admitted by / under registered medical	As per Level 4, plus: Nursing at least one registered nurse per shift with qualifications and experience in child	As per Level 5, plus: Medical access—24 hours—to registered medical specialist with credentials in

experience in perinatal and/or infant mental health) for assessment, case management and review.

Nursing

 access—during business hours—to registered nurse who has qualifications in mental health and/or extensive mental health experience, in addition to training and/or experience in perinatal and/or infant mental health.

Allied health

 access—during business hours—to multidisciplinary team of allied health professionals with training / experience in perinatal and/or infant mental health.

Other

- consultation may be available from visiting specialties in mental health, maternity and child health and other areas of health.
- access to IPRA (public sector only).

- specialist with credentials in psychiatry.
- access—24 hours—to medical practitioner.
- access to registered medical specialist with credentials in paediatrics for medical consultation-liaison (may be via telehealth).

Nursing

- suitably qualified and experience registered nurse (however titled) in charge of unit.
- registered nurse in charge of each shift suitably qualified and has extensive mental health experience.
- unit nursing staff, two or more of whom each shift are registered nurses and have qualifications in mental health and/or extensive mental health experience.
- if inpatient unit occupancy is low, only one nurse per shift need have qualifications in mental health and/or extensive mental health experience.
- enrolled nurses may complement nursing team.

health and/or perinatal/infant mental health.

Other

 access to extensive range of on-site and/or visiting specialties in health / mental health / maternity / child health psychiatry and qualifications and experience in perinatal and/or infant mental health.

Nursing

registered nurses, majority
 of whom have qualifications
 in mental health and/or
 extensive mental health
 experience or qualifications
 and/or extensive experience
 in perinatal and/or infant
 mental health.

Allied health

extended-hours access to community- or hospital-based allied health professionals with relevant specialist mental health qualifications and experience.

 if infant admitted with mother, registered nurse with qualifications in mental health and/or extensive mental health experience provides 24-hour care and observation for mother and infant throughout admission.

Allied health

- access to psychology, social work, occupational therapy, speech pathology and dietetic services (postgraduate training desirable).
- access to dedicated pharmacy services for mental health.

Other

- AINs or equivalent may complement clinical team at discretion of nurse in charge.
- Bachelor of Nursing students (second or third year undergraduate) may complement clinical team at discretion of nurse in charge and under registered nurse supervision.

		 access to range of on-site and/or visiting specialties in health / mental health / maternity / child health. 		
Specific risk considerations	Nil	Nil	Nil	Nil

Support service requirements for perinatal and infant mental health services

	Level 3	Level 3		Level 4		Level 5		Level 6	
	On-site	Accessible	On-site	Accessible	On-site	Accessible	On-site	Accessible	
Anaesthetic*					3		3		
Medical imaging		1		2		3		3	
Medication		2	3		4		5		
Pathology		2		2		3		3	
Perioperative (relevant section/s*)					3		3		

^{*}Required only in services where ECT performed

Table note: On-site means staff, services and/or resources located within the health facility or adjacent campus including third party providers. Accessible means ability to utilise a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site)—without difficulty or delay—via various communication mediums including but not limited to face-to-face, telehealth, telepharmacy, and/or outreach.

.Subsection 4.9 - Transcultural service

Level 6			

Service description

- capable of providing short-term or intermittent mental health care to low-, moderate- and high-risk/complexity voluntary and involuntary mental health consumers via statewide consultation-liaison and/or outreach mental health service.
- integrated service delivered to targeted population across all ages from culturally and linguistically diverse backgrounds, diagnosed with mental illness or present with mental health problems and who may show evidence of range of complexities relating to cultural barriers, migration and settlement issues, some consumers presenting with special care needs.
- accessible during business hours with some service components operating on extended-hours basis.
- service components consist of:
 - transcultural clinical consultation service providing intake, triage and consultation
 - range of programs / strategies for promotion, prevention and early intervention of mental illness in target population
 - cultural consultation service that provides cultural clarification, advice and support (including socio-cultural assessments) and is coordinated by clinicians of Transcultural Mental Health Service with input from range of bicultural / bilingual cultural consultants.
- service provision typically includes: multidisciplinary assessment, diagnosis clarification, triage and targeted interventions by transcultural
 mental health professionals; assistance with care planning / care coordination; consumer and carer education and information; primary and
 secondary promotion, prevention and early intervention programs; consultation-liaison with other service providers; and referral, where
 appropriate.
- delivered by highly specialised, multidisciplinary team of mental health professionals (psychiatrists, nurses, allied health professionals, cultural consultants and other health workers) with qualifications and experience in transcultural mental health.

Service requirements

As per module overview, plus:

- care to low-, moderate- and high-risk/complexity voluntary and involuntary mental health consumers via statewide consultation-liaison and/or outreach mental health service.
- identification, assessment, monitoring and interventions of mental health problems ranging in risk and complexity (that may be associated with complex comorbidities and/or indicators of treatment resistance).
- integrated approach to identification, assessment and intervention of any co-occurring substance-use disorders.
- input into targeted clinical programs for individuals / groups / families (transcultural content for group programs delivered by mental health services).

- forward referrals for assessment / diagnosis / intervention as required.
- timely contribution to development of comprehensive and culturally appropriate mental health recovery plan.
- extensive clinical detail collected to inform assessment / diagnosis / intervention / recovery, and broader service delivery in all levels of service.
- access to range of primary (e.g. transcultural stress management resources) and secondary (e.g. culturally tailored programs for mental health literacy and recovery programs) prevention services.
- assertive outreach applicable to service and target population.
- psychoeducation for consumers, families / carers and groups (including information about available mental health problems and illnesses, indicated treatment options and support services).
- separate clinical services for families/carers, if required.
- specialist mental health assessments and interventions are conducted by clinicians and health workers of this service, reflecting cultural appropriateness.
- as consultation service, primary clinical responsibility and decision-making for consumer remains with referring service.
- where appropriate, facilitates access for presenting individuals to their local mental health service or other relevant services, including general practitioners and multicultural support services.
- statewide specialist consultation-liaison to other health and non-health services / agencies for target population.
- Mental Health Promotion Prevention and Early Intervention (MHPPEi) activities coordinated and delivered by project officers and/or group facilitators who are suitably qualified and experienced in program topic area and cross cultural work, and are supervised by qualified allied health staff.
- works in partnership with mental health services and non-government specialist providers.
- provides assistance, support and resources to referring mental health service to ensure a culturally appropriate recovery plan is prepared and reviewed for each consumer.
- current policy and procedure documentation maintained for MHPPEi and cultural consultation programs, and integrated into staff induction training.
- documented processes and collaborative partnerships with multicultural services sector (e.g. Department of Immigration and non-government multicultural services, such as refugee services, cultural groups and organisations).
- co-located with authorised service under Mental Health Act 2016.

Workforce requirements

As per module overview, plus multidisciplinary team of mental health professionals with qualifications and experience in transcultural mental health, including:

Medical

- access—during business hours—to registered medical specialist with credentials in psychiatry, and relevant specialist qualifications and experience in transcultural mental health in relation to assessment, management and review of culturally and linguistically diverse consumers.
- where consumers of clinical consultation service are also consumers of their local mental health service, their ongoing care is coordinated by registered medical specialist with credentials in psychiatry for assessment, treatment, case management and case review.

Nursing

access—during business hours—to registered nurse with cross-cultural qualifications and experience relevant to service being provided.

Allied health

- access—during business hours—to multidisciplinary team of allied health professionals with relevant specialist mental health and cross-cultural qualifications and experience.
- additional allied health support provided to cultural consultation service by registered clinicians with qualifications and experience in delivering transcultural mental health care.
- access to senior allied health staff member of the service (in an on-call capacity) for bilingual mental health clinicians who deliver services outside regular business hours.

Other

- access to bilingual consultants.
- access to range of visiting or local health / mental health specialties.
- clinical and cultural consultation services provided face-to-face, via telehealth facilities or on visiting basis.
- access to IPRA (public sector only).

Specific risk considerations

Nil

Support service requirements for transcultural mental health services

	Level 6		
	On-site	Accessible	
Medication		2	
Medical imaging		3	
Pathology		3	

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Legislation, regulations and legislative standards

In addition to what is outlined in the Fundamentals of the Framework, mental health services must comply with the following:

- Mental Health Act 2016 Resource Guide https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/clinical-staff/mental-health/act
- National Standards for Mental Health Services 2010
- Patients Absent Without Permission Flipchart http://gheps.health.gld.gov.au/mentalhealth/mha/policy.htm
- Queensland Criminal Code Act 1899 www.legislation.qld.gov.au/LEGISLTN/CURRENT/C/CriminCode.pdf

Non-mandatory standards, guidelines, benchmarks, policies and frameworks

(not exhaustive & hyperlinks current at date of release of CSCF v3.2)

In addition to what is outlined in the Fundamentals of the Framework, the following are relevant to mental health services:

- A national framework for recovery-oriented mental health services, AHMAC,
 Commonwealth of Australia, 2013 http://www.ahmac.gov.au/cms documents/National%20Mental%20Health%20Recovery%

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- Australian and New Zealand College of Anaesthetists. Professional Standard PS55: Recommendations of Minimum Facilities for Safe Administration of Anaesthesia in Operating Suites and Other Anaesthetising Locations. ANZCA; 2008.
 www.anzca.edu.au/resources/professional-documents/
- Australian Government Department of Health and Ageing. National Practice Standards for the Mental Health Workforce. 2013 State of Victoria, Department of Health 2013f. http://www.health.gov.au/internet/main/publishing.nsf/Content/5D7909E82304E6D2CA257C430004E877/\$File/wkstd13.pdf
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 Care Settings. Melbourne: Victorian Government Department of Human Services; 2004.
 www.health.vic.gov.au/acute-agedcare/
- Australian Mental Health Outcomes and Classification Network. Reporting Framework for the National Outcomes and Casemix Collection. www.amhocn.org/
- Guidelines for determining benefits for private health insurance purposes for private mental health care, Private Mental Health Alliance. (as updated from time to time)
 http://www.pmha.com.au/Portals/4/PublicDocuments/GuidelinesForDeterminingBenefitsForHealthInsuranceBenefitsPurposesForPrivateMentalHealthCare/Guidelines%20for%20
 Determining%20Benefits%202012%20Edition.pdf
- Guideline for Mental Health Service Responsiveness for Aboriginal and Torres Strait Islander People. http://www.health.qld.gov.au/qhpolicy/docs/gdl/qh-gdl-365-4-1.pdf
- Guideline for the use of the cultural information gathering tool (best practice for the
 provision of Aboriginal and Torres Strait Islander culturally appropriate mental health
 care). Mental Health, Alcohol and Other Drugs Branch.
 http://www.health.qld.gov.au/qhpolicy/docs/gdl/qh-gdl-365-3.pdf
- Multicultural Mental Health Australia. Framework for the Implementation of the National Mental Health Plan 2003-2008 in Multicultural Australia. Canberra: Department of Health and Ageing; 2004. www.mmha.org.au/
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- NICE Clinical Guidelines 103, Delirium: Diagnosis, prevention and management, July 2010, National Institute for Health and Care Excellence, UK.
- Procedure for Acute Behavioural Disturbance Management (including acute sedation) in Queensland Health Authorised Mental Health Services. http://gheps.health.qld.gov.au/mentalhealth/docs/ABDM-proc.pdf
- Queensland Health Mental Health Patient Safety Strategic Plan 2012 2017 http://qheps.health.qld.gov.au/mentalhealth/docs/mh_PatSaf_2012-17.pdf
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