

29 July 2020

Australian Government
Department of Health

Attention: mental.health.liaison@health.gov.au

Proposed Service Model for Adult Mental Health Centres – consultation paper July 2020

The Northern Territory Mental Health Coalition (the Coalition) welcomes the opportunity to comment on the proposed service model for trialling Adult Mental Health Centres. Our response relates to the new Adult Mental Health Centre to be established to service the Greater Darwin area.

The Coalition is the peak body for community mental health and wellbeing. We represent NT community managed mental health organisations, and work in collaboration with a wide network of organisations, people with lived experience, their families and supporters across the Northern Territory. We work at both national and local levels to improve the mental health and wellbeing of Territorians.

This response has been prepared in consultation with our colleagues and other Northern Territory organisations, Association of Alcohol and Other Drug Agencies NT (AADANT), NT Office of the Public Guardian, SabrinasReach4Life and member service organisations.

The Coalition welcomes the announcement that the Australian Government intends to invest a further \$14 million over three years in adult mental health in the Greater Darwin area. Extending the hours of service and opportunities for servicing new clients will be important outcomes for the new Darwin centre.

The need for new and on-going investment across the stepped care spectrum is critical, given that the mental health and substance use disorders burden of disease in the Northern Territory contributes to 36% of the burden of disease, compared to 12% in Australia as a whole.¹ Concerningly, the number of Aboriginal Territorians experiencing high or very high psychological distress is on average 2.9 times that for non-indigenous people.²

¹ AIHW 2019 Australian Burden of Disease Study: impact and causes of illness and death in Australia 2015 cited in NTPHN (2019) NTPHN Program needs assessment 2019

https://www.ntphn.org.au/web_images/2019%20NEEDS%20ASSESSMENT%20-%20FINAL%20UNLINKED.pdf

² Australian Bureau of Statistics 2018 Causes of death, Australia, 2017 cited in NTPHN (2019) NTPHN Program needs assessment 2019 https://www.ntphn.org.au/web_images/2019%20NEEDS%20ASSESSMENT%20-%20FINAL%20UNLINKED.pdf

The Coalition understands that each centre will be expected to provide four core elements of care:

- responding to people experiencing a crisis or in significant distress to avoid calling on hospital emergency departments
- a central point to connect people to other services in the region
- in-house assessment, including information and support to access services
- evidence-based and evidence-informed immediate, and short to medium episodes of care.

In order to ensure the most effective returns on the new investment in the Adult Mental Health Centre in the Greater Darwin region, it is essential to recognise that there are only a small number of existing community and government services in the area and that demand for these services outstrips supply. Emergency departments in the NT cater for a disproportionately high number of mental health presentations, as a result of the limited availability of other mental health services, particularly after hours. The end of the PHAMS program has also reduced the availability of care for people experiencing depression and/or anxiety, further adding to the pressure on emergency departments.

Emergency department statistics³ (for the NT as a whole, so including hospitals outside the Greater Darwin area) indicate that the rate of mental health presentations per 10,000 population in 2017-18 was 280.4, 2.4 times the national rate (115.9). Of the 6919 presentations to NT emergency departments 35.8% (2478) were triaged as semi-urgent or non-urgent, 40.8% as urgent and 23.4% as emergency or in need of resuscitation. Fifty-seven percent of people presenting were admitted to the hospital, and 39.3% departed without admission or referral (nationally these proportions are 34.9% and 58.1% respectively).

Sixty percent of mental health presentations to NT emergency departments were diagnosed as related to psychoactive substance use (compared to 27.2% nationally)⁴. This reflects the higher proportion of the population reporting using alcohol and drugs in the NT (2019: 35.4% alcohol use; 19.6% recent illicit drug use) compared to national use (2019: 24.8%

³ Australian Institute of Health and Welfare 2020 (AIHW 2020a). Mental health services provided in emergency departments in Mental health services in Australia. Canberra: AIHW. Accessed 28 July 2020 <https://www.aihw.gov.au/reports/mental-health-services/mental-health-services-in-australia/report-contents/hospital-emergency-services>

⁴ AIHW 2020a. Mental health services provided in emergency departments in Mental health services in Australia. Canberra: AIHW. Accessed 28 July 2020 <https://www.aihw.gov.au/reports/mental-health-services/mental-health-services-in-australia/report-contents/hospital-emergency-services>

alcohol; 16.4% illicit drugs)⁵. The next highest diagnosis for mental health presentations to NT emergency departments was for stress-related disorders (17.5%)⁶.

The existing situation means that some of the assumptions underpinning the proposed service model for Adult Mental Health Centres do not hold true in the Greater Darwin region, and will need to be addressed in developing the local model of service:

- a model based on immediate crisis care followed by warm referrals assumes that other services are available where the client can obtain on-going help. Additional investment will be needed in on-going support/treatment services in the Greater Darwin region to meet additional demand generated through the new Centre's activities. In particular, greater investment in services and shared pathways are needed across GPs, mental health counselling and AOD services.
- a service model that accommodates crisis care for responding to people experiencing a crisis or in significant distress and reduces the call on emergency departments (p4) requires the availability of experienced clinicians. These types of clinicians currently work primarily in the public hospital system and are accessible by presentation at emergency departments. Outside the public hospital system, there are very few GPs trained in mental health (with the number bulk-billing unknown). headspace services in Darwin and Katherine have psychologists who bulk-bill, but we are not aware of other psychiatrists or psychologists who offer bulk-billing for adult mental health clients in the Darwin region. The announcement that the GP Psychiatry Support line is now available to NT GPs is very welcome⁷, although it is too early to tell how many NT GPs will register for the business hours service.
- Assessment and system navigation services and psycho-social support for people and families experiencing heightened distress requires other skillsets and environmental contexts, with availability of alcohol and other drug services of particular importance in the NT.

The newly formed Northern Territory Lived Experience Network recently discussed their priorities for the design attributes of the new Greater Darwin adult mental health centre. Participants confirmed the importance of:

- the physical environment feeling safe, comfortable, therapeutic and private. Repeated phrases included: *break out spaces, soft furnishings, soft sounds, gardens, no fluoro lights, artwork, no through traffic and reflecting community.*
- location, accessibility and promotion of the centre within the community. Themes were *24-hour access, One-Stop-Shop, central location, transport support, public transport, hotline, online information/directory, text, phone, email options* and promotion by *TV, radio, newspaper, social media, buses.*

⁵ Australian Institute of Health and Welfare 2020 (AIHW 2020b). Smoking status, alcohol risk and illicit drug use, people aged 14 and over, by Primary Health Networks, 2016 and 2019 (per cent) in National Drug Strategy Household Survey 2019. Cat. no. PHE 270. Canberra: AIHW. doi:10.25816/e42p-a447 Accessed 28 July 2020 <https://www.aihw.gov.au/reports/illicit-use-of-drugs/national-drug-strategy-household-survey-2019/data>

⁶ AIHW 2020a. Mental health services provided in emergency departments in Mental health services in Australia. Canberra: AIHW. Accessed 28 July 2020 <https://www.aihw.gov.au/reports/mental-health-services/mental-health-services-in-australia/report-contents/hospital-emergency-services>

⁷ NTPHN GP Psychiatry Support Line launches in NT. NTPHN eNews 23 July 2020; <https://www.ntphn.org.au/gp-psychiatry-support-line>

- skilled staff providing a safe and person-centred service. Repeated attributes included *welcoming, non-judgmental, empathetic, calming, look/act non-clinical, have lived experience, non-pathologizing, not rushed, ask me about my needs, listen to me, not have to retell my story and be representative of my community.*
- providing holistic and non-clinical supports as part of multi-disciplinary teams. Repeated calls for *advocacy, peer support, problem solving, counselling, individual and group options, strengths based, trauma informed, support to understand and learn own strategies, access to other services and supports, integrated and holistic mental health, AOD and physical supports, skilled GPs, medication support, NOT psychiatrist dominated.*

To ensure that the return on this new investment is maximised, it will be important to ensure that there is clarity around the centre's intended target client group, the outcomes that are expected, and where the new centre sits within the Stepped Care model.

Integration with the existing system, and how the new adult mental health centre can complement existing strengths and value add in a supply limited environment will be critical to its success. Strong partnerships between the Australian Government, the PHN and the Northern Territory Government and community sector, together with people with lived experience, are fundamental to leveraging best value from the new investment.

The Coalition was therefore pleased to learn from Chris Bedford (Mental Health Australia webinar, 17 July) that the Commonwealth Department is committed to having Primary Healthcare Networks plan and co-design centres with local input, particularly from people with lived experience; and that cross-sectoral collaboration and partnerships will be looked on favourably in commissioning and operating the centres.

In the Greater Darwin region, this approach is consistent with current initiatives to promote service integration within a Stepped Care model, and will entail:

- ensuring that local people with lived experience of mental health issues are embedded in designing, planning and operating the Centre
- co-design and planning for the Centre that closely engages the community sector and Aboriginal community controlled organisations as well as the Northern Territory Government and NTPHN
- open to co-location of a variety of services and related organisations.

The Coalition understands that the department has yet to determine how an evaluation of the trial sites will be undertaken. We strongly recommend that evaluation is built-in from the very beginning to encompass the consultation and co-design phase for the new centres. All evaluation activities, including co-designing the evaluation, must engage local people with lived experience, together with local evaluation experts whose experience and knowledge will enable centres and clients to gain additional value from the evaluation.

The Coalition and our colleagues, AADANT, NT Office of the Public Guardian SabrinReach4Life and member service organisations are looking forward to working with

the NT Primary Health Network, the Northern Territory Government and Aboriginal organisations and other key stakeholders to ensure that the service model for an adult mental health centre for Darwin makes a significant difference to the mental health and wellbeing of adults in the Greater Darwin area.

If you require further information or clarification please contact Vanessa Harris, Executive Officer, NT Mental Health Coalition (e: eo@ntmhc.org.au; t: 0408 588 904).

