

POLICIES

POLICIES for Continuing Care of Persons with Mental Disorders

[7] Engagement with ongoing care

- a) Community Mental Health Services
- b) Outreach services

[7 b] Outreach services

MHYFVic advocates improved funding to mental health services at regional level for centre-based programs and that Tier Three regional services for the four age-specific strata (Aged-Care, Adult, Youth and Child & Family) should include consultancy and service delivered via the Community Health Centres (Tier Two).

MHYFVic advocates that at least as much funding should be allocated to community-based services as that to hospital-based services, and that at least half of the community funding be spent on outreach services delivered collaboratively with other agencies.

- Outreach programs should provide:
 - Community Assessment & Treatment (CATT) Teams
 - Intake/Brief intervention clinicians at Community Health Centres and Public Hospital EDs.
 - Consultancy services to relevant Tier Two and Tier One agencies

Separate teams for each age stratum allow flexible response for cases unable to be seen at centre-based programs, as well as crisis response, but out of normal office hours it is likely that the adult service team would need to cover the emergencies of other strata.

Intake and brief intervention programs at Community Health Centres should be offered on a zero-waiting list basis.

Consultancy programs should be offered to Tier Two and Tier One agencies of all four strata.

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