



FAQs FOR GENERAL PRACTITIONERS

December 2020

Q. What is HeadtoHelp?

[HeadtoHelp](#) is a new, **free** mental health service which can help you manage patients who are experiencing stress, anxiety and other mental health issues. The \$26.9 million mental health service is funded by the Commonwealth Government for Victorians, in response to the COVID-19 pandemic, and delivered by Victorian Primary Health Networks (PHNs).

HeadtoHelp helps people find the right mental health service for their needs and can provide onsite support for those who need it, as well as telehealth services. There are 15 HeadtoHelp hubs in Victoria. In South Eastern Melbourne, the hubs were commissioned by open tender, and are located in **Frankston, Officer and Berwick**.

The hubs have multidisciplinary teams of mental health workers, which can include psychologists, mental health nurses, social workers, and alcohol and drug workers. They will coordinate with you - the patient's regular GP – or help patients find a regular GP if they do not have one. Services are free of charge and a Medicare card or ID is not required.

Q. What health care services are available at the HeadtoHelp hubs (e.g. psychologists, mental health nurses)

As the hubs are scaled-up, each hub will have a multidisciplinary team from a variety of professional backgrounds delivering a range of service types. Depending on local needs, hubs may have GPs and mental health workers, including psychologists, mental health nurses, social workers and alcohol and drug workers, who can support people onsite at a hub, through telehealth or referral to other services. Different hubs may specialise in different areas or disciplines and offer different intervention types such as 1:1, group and care co-ordination.

Q. How will HeadtoHelp be different to how I currently work with patients who may need ongoing mental health support?

The HeadtoHelp hubs' multidisciplinary teams of mental health workers - which may include psychologists, mental health nurses, social workers, and alcohol and drug workers - will coordinate with the patient's regular GP, or help them find a regular GP if they do not have one.

The service is free to the consumer. Clients are assessed and referred into the appropriate level of services according to their 'risk' profile rating, from 1 (low risk) to 5 (high risk). HeadtoHelp is focused on patients with a rating of 3-4, which is deemed short to medium term care. People with risk ratings 1,2 and 5 will be referred to other services (State, Commonwealth, Private) appropriate to their identified level of risk.

Some of the main ways that HeadtoHelp may be different include:

- Anyone can call/refer
- Support/services are accessible to everyone at no cost
- People can access the service even if they have never had any contact with mental health professionals
- No requirement for a Mental Health Care Plan
- A comprehensive assessment is completed by an intake team member, who are clinicians

All hub providers work in a collaborative care manner and will work with you to determine the level of mental health support appropriate for your patient or consumer.

Q. How will HeadtoHelp help general practices?

This is an extra service option to support GPs managing increasing numbers of patients experiencing stress and anxiety as a result of the COVID-19 pandemic.

- ✓ HeadtoHelp can help GPs find the most suitable mental health support for their patients.
- ✓ HeadtoHelp can support GPs who are unsure of the severity of the problem, by providing a comprehensive patient assessment to identify the appropriate type and intensity of support needed for their patient.
- ✓ HeadtoHelp can find support for patients who are not eligible for Medicare, such as international students, refugees or people seeking asylum.

Please note, HeadtoHelp is not a crisis service and patients requiring immediate care or crisis intervention should be managed through the local Mental Health Triage or 000 if there are immediate safety concerns.

Q. What is the pathway for a patient?

1. The person (or their GP or other clinician) calls the HeadtoHelp central intake number, 1800 595 212.
2. The HeadtoHelp intake team does an initial assessment with the patient to inform the level or intensity of care most suited to the person's situation.
 - Intake uses the **Initial Assessment Referral Decision Support Tool (IAR-DST)** which determines level of need from Level 1 to 5.
 - If a person presents at a hub, intake is done by a team member there using the same IAR tool.
3. The person is then referred to the appropriate service(s) for their level of care. This might include hub service, or other no-cost or low-cost service, or relevant emergency services, or a service that they consent to pay for.

Q. What's the difference between HeadtoHelp intake and the mental health hubs?

The HeadtoHelp service comprises a central intake line (1800 595 212) plus the mental health hubs, currently in 15 locations across Victoria. We are encouraging people to call the 1800 595 212 number first. However, if someone goes direct to a hub, intake will be managed by the team there.

The HeadtoHelp central intake 1800 595 212 – assesses, advises and connects

- ✓ The intake team's trained mental health professionals assess a person's current needs, advises them on the best support and connects them with the most appropriate local services, which may be an existing service or at a HeadtoHelp mental health hub.
- ✓ The intake team uses the Initial Assessment and Referral decision support tool (IAR-DST) that uses clinical and social questions to work out what level of service intensity (from 1 to 5) a person needs.
- ✓ The HeadtoHelp intake teams have knowledge of a wide range of local services, from low to high intensity, across the mental health care system. This includes government (local, state and federal) as well as private services and supports. These services may be online, face-to-face or by telehealth.

HeadtoHelp mental health hubs – multidisciplinary team care for moderate to high intensity cases

- ✓ Primary Health Networks have commissioned health service providers to operate the HeadtoHelp mental health hubs. The hubs accept referrals from the HeadtoHelp central intake and support people with moderate and complex mental health issues, especially those who may struggle to access services through other pathways. (These are Level 3 and 4 under the IAR-DST.)
- ✓ If a person attends a hub directly, the hub team will conduct the intake using the same IAR tool used by the 1800 595 212 central intake team.
- ✓ Hub services includes individual interventions, group work, care coordination and service navigation for patients, and medication reviews.
- ✓ As HeadtoHelp hubs are scaled-up they will include multidisciplinary teams of mental health practitioners. Each hub team is different and may include mental health nurses, psychologists, peer, social or alcohol and other drug workers, and other allied health workers such as occupational therapists who can support people onsite at a hub, or through telehealth. This means that patients' social needs – especially issues arising from COVID-19, like housing and financial difficulties, can also be addressed through appropriate referrals from this team.
- ✓ HeadtoHelp hubs will coordinate with the patient's regular GP, with their consent, – or help them find a regular GP if they do not have one.

Q. Do I need to write a referral for my patients for this service?

No. In the first instance, please call HeadtoHelp central intake on 1800 595 212. Our HeadtoHelp intake team may request further information to assist your patient into the most appropriate care. If your patient is going to receive care from a hub, with their permission, you will be contacted for further information and shared care planning. A patient or carer may choose to contact HeadtoHelp themselves – anyone can call.

The HeadtoHelp central intake is staffed by clinicians who use **Initial Assessment Referral Decision Support Tool (IAR-DST)**. People with level 1 and 2 needs will be connected with existing lower intensity services. Those with Level 3 and 4 needs may receive care at the hubs, either onsite or through telehealth, or other more suitable services. Level 5 will be connected to specialist or acute mental health services, including into emergency care or into an area mental health triage. [Learn more here](#).

Q. What are the expected wait times for service access?

While it is difficult to anticipate demand during the current surge in demand for mental health support, the services are committed to timely response. The service aims to follow up the majority of referrals within one business day and complete the initial assessment and referral at first point of contact. Any consumers who experience a delay in access are supported through active waitlist management to assess risk and link with other services as needed.

Q. Will I receive feedback on my patient's care from other providers?

Yes, if your patient is treated by a HeadtoHelp mental health hub we encourage the use of shared care plans through a consumer's mental health journey.

Q. What type of assessment and referral will be used by HeadtoHelp?

HeadtoHelp uses the Initial Assessment and Referral decision support tool (IAR-DST). This determines level of need from Level 1 (low intensity) through to Level 5 (acute). Whether intake is done through the central 1800 595 212 number or direct at a hub, the same tool will be used.

- ✓ People with Level 1 and 2 needs will be connected with existing lower intensity services, usually phone or online support
- ✓ Those with Level 3 and 4 needs may receive care from a hub, either onsite or through telehealth, or other more suitable services, including MBS funded psychological services
- ✓ Level 5 will be connected to specialist or acute mental health services, including into emergency care or into an area mental health triage

HeadtoHelp may also use assessments like K5, K10, SOFAs in their initial assessment.

Q. Will my patients need a mental health care plan to access HeadtoHelp services?

No, a mental health care plan is not required to access HeadtoHelp. However, referrals to other appropriate services may require that a mental health care plan is completed. If this is the case, a HeadtoHelp team member will be in contact with you.

Q. My patient is not eligible for Medicare, can they access HeadtoHelp?

Yes. All people living or working in Victoria (or within a Victorian Primary Health Network catchment such as border towns) are able to access HeadtoHelp, regardless of residency status. This includes international students, refugees and people seeking asylum.

Q. Will support for my patient be face-to-face or is there an option for telehealth?

Yes, there are telehealth options. Keeping in mind consumer and clinician preferences, we will help to determine the level of care your patient needs – this may include online, telehealth or face-to-face options as suitable. Our face-to-face services will be held in a COVID-safe environment. Please note that the COVID-safe plan of the provider may influence the format that services are delivered.

Q. Is HeadtoHelp only for patients experiencing COVID-19 distress?

No, HeadtoHelp welcomes everyone who needs mental health and wellbeing support, whether their mental health issues are pre-existing or have emerged during the pandemic.

The surge in people seeking support due to COVID-19 was the stimulus for setting up the HeadtoHelp service. The central intake and 15 hubs opened on 14 September 2020 and are currently funded for 12 months.

As part of an integrated primary care response, and to support continuity of care, people will be encouraged to also see their regular GP, or will be helped to find a regular GP if they don't have one.

Q. If my patient already has a private psychologist, can they access the HeadtoHelp services?

Yes they can. However, to ensure continuity and consistency of care and avoid duplication, people will be encouraged to reconnect with their existing care providers. The focus of HeadtoHelp is to assist people who may need mental health support but are not currently receiving care

Q. What is the process if my patient has been directed by HeadtoHelp staff to another mental health care provider? Will this be reported back to me?

Yes, with a patient's consent. The outcome of all your referrals will be communicated to you. This includes if your patient is recommended to have a lower level of support, or a higher level of support than HeadtoHelp can provide.

Q. Does this service help me manage my patients who already have a mental health treatment plan?

For someone with moderate to high-intensity needs already on a mental health treatment plan, the intake team may recommend HeadtoHelp hub services to receive multidisciplinary team care including psychosocial support and care coordination, which is distinct from one to one psychological therapies.

Q. Is this a free/low-cost service?

Yes, there is no cost for assessment and advice through HeadtoHelp's central intake or if receiving services from a HeadtoHelp hub. But not everyone will be suitable for treatment from a hub.

There may be fees for recommended services. The intake team will take into account a person's financial situation when recommending services or support. The most suitable service option may include fee-based services where it is determined that someone has the capacity to pay a fee (including gap fees for MBS services).

We will find free or low-cost services if that is what a person needs. This may include from a HeadtoHelp hub if the person has moderate to high-intensity mental health needs, as determined by the Initial Assessment and Referral Decision Support Tool, and cannot afford to access suitable service elsewhere.

Q. If I send my patient to HeadtoHelp, will they receive free counselling services?

Not necessarily. Whether your patient rings the 1800 595 212 or turns up at a hub, they will have an initial assessment done and the most suitable service option will be recommended. In some cases, this may include fee-based services (if someone has the capacity to pay a fee e.g. gap fees for MBS psychology services).

Q. Where are the hubs?

The hubs are part of an initial network of 15 hubs in Victoria.

In South Eastern Melbourne, there are three hubs:

1. **Berwick Healthcare**
76 Clyde Road, Berwick
2. **Young Street Medical and Dental Centre**
89-97 Young Street, Frankston
3. **Officer Medical Centre**
4 Cardinia Rd, Officer

You can find the other Victorian hub locations [here](#).


The locations and providers for the hubs were chosen based on data and health needs analysis and the capacity of primary care settings to rapidly mobilise and deliver appropriate workforce and governance.

Q. Are patients zoned to the closest hub?

Access to hubs will not be restricted by the location of the person. If a person seeks help directly, rather than calling the 1800 595 212 intake line, going to the nearest hub is the best place to start. However, the 1800 595 212 intake may advise the person that another hub will be more appropriate, for example they might have a clinician who works with a particular cohort or has a more appropriate type of service.

Q. What hours are the hubs available?

HeadtoHelp hubs and intake are not crisis services, so our intake services operate during business hours 8.30am to 5pm Monday to Friday, except public holidays. The hubs operate these same core hours with localised extended hours which vary from hub to hub.



If the intake team is engaged, callers during business hours will be given the option of leaving a message and receiving a call back. After hours callers will hear a recorded message asking them to call back during opening hours and giving them Beyond Blue's 1300 number if they want to speak with someone right away.

There is also a "call back" request form on this website. A HeadtoHelp team member will call people back during operating hours.