



INTEGRATED PRIMARY MENTAL HEALTH AND SUICIDE PREVENTION (STEPPED CARE)

Stepped care is defined as an evidence-based, staged system comprising a hierarchy of interventions, from the least to the most intensive, matched to the individual's needs. While there are multiple levels within a stepped care approach, they do not operate in silos or as directional steps, but rather offer a spectrum of service options.

Any stepped care approach must incorporate three key elements:

1. least intensive first: recommended treatment should be the least intensive of those currently available, but still likely to provide significant health gain
2. routine measurement: is self-correcting, results of treatments and decisions are monitored systematically, and changes are made if current treatments are not achieving significant health gain
3. systemic: standardises systems and procedures with the explicit aim of improving effectiveness and efficiency – provides structure and logic to the care system.

In a stepped care approach, a person presenting to the mental health system is provided with options that best suits their current need and ability to benefit. An individual does not have to start at the lowest, least intensive level of intervention in order to progress to the next 'step'. Rather, they enter the system and have their service level aligned to their requirements.

Stepped care components

The following components are central to how we intend to commission a stepped care approach to care.

Person-centred

- People, families and the community are at the centre of the stepped care approach
- People, families and the community are resilient and have the capability to help themselves
- People are best supported in the places they live alongside their families and communities
- People are at the centre of all decisions about care and support
- People are linked to general practice wherever possible.

Planning

- All people benefit from having a 'plan of care' that is theirs, reflects their needs, goals and desires. This could range from a formal 'care plan' to more informal planning discussions or arrangement.
- Planning is directed by the individual, with support from carers, family, general practice or other service providers which is only if required.
- Decisions to 'step up' to more intensive treatment are based on consumer preference, clinical judgement and clinical outcome measures.



Access

- People will have a range of access options or pathways available to them. These could range from self-referral, walk-in, to more formal referral pathways.
- Feasibility of access model options such as a centralised intake process to support improved and consistent access will be explored.
- The access function is likely to include access to information, advice as well as screening or triage/assessment activities.
- There is always a pathway available to those with high needs.
- Fast track access is available to specialist mental health services.

Range of supports and options

- Choice for consumers is important and as such a range of options may need to be provided
- These options must be accessed as part of a plan so they are organised and appropriate for the consumer's needs and context
- Options for location of delivery (e.g. primary care, school, home, work), time of delivery (e.g. working hours, extended hours) and mode of delivery (e.g. online, face to face) are also important

Aligned with wider supports and interventions

- There is a range of support and intervention options and choices that would be beneficial to include as part of our stepped care approach, matched to individual needs. These range from lower to higher intensity options including information and advice, eTherapy, self-help, brief therapy (ie. cognitive behaviour therapy (CBT)), single session therapy, youth mental health supports, peer to peer specialist advice and support, specialist mental health services and options for primary care to offer enhanced support.
- There will be explicit links to specialist services and the integration of health and social care support.
- The least intrusive treatment appropriate to meet the presenting need is offered.
- Some basic 'self-help' advice and support is appropriate for everyone, no matter how complex the difficulties might be.
- Specialist services will support primary care with peer to peer support and advice via 'shared care' arrangements.

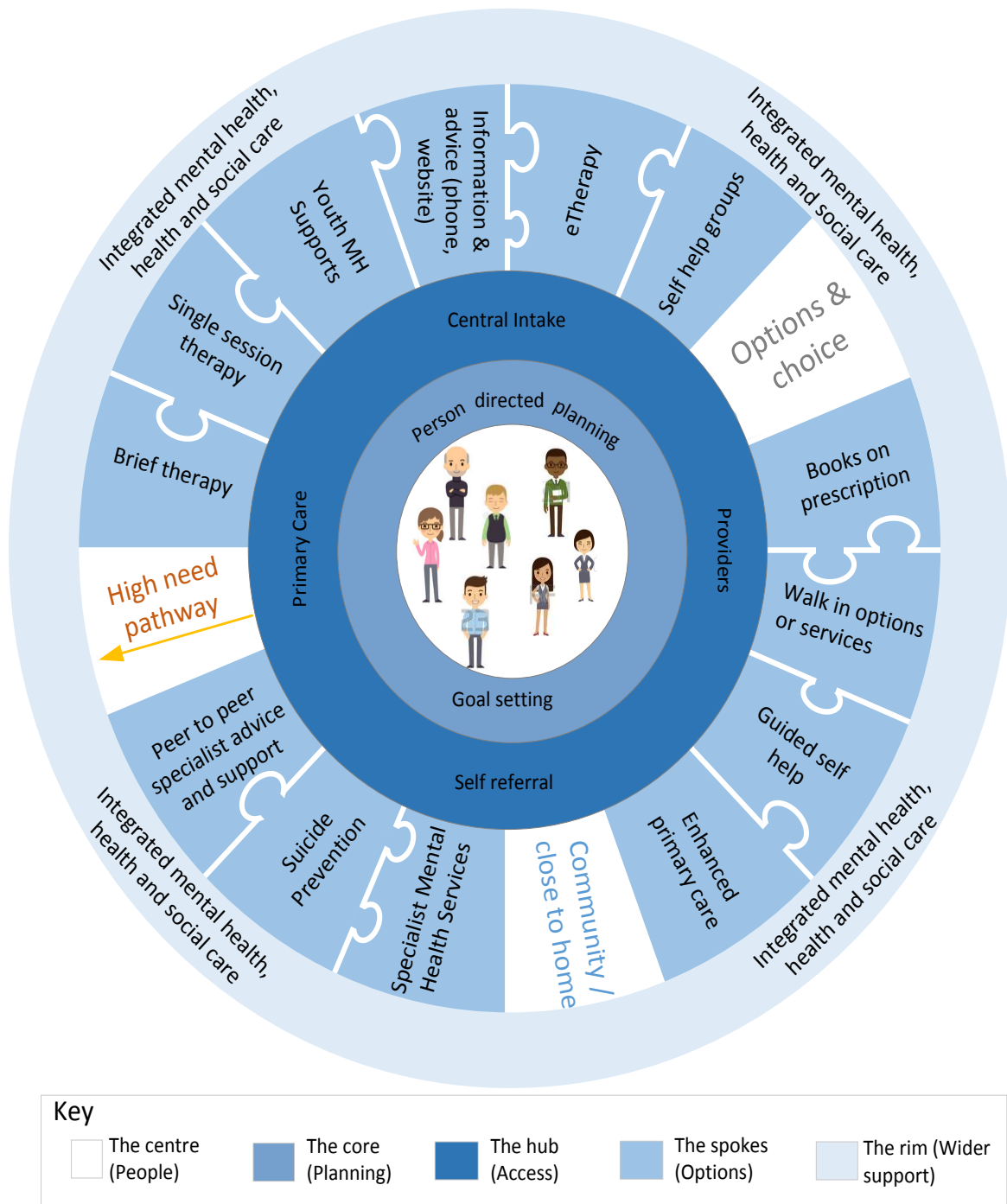


Figure 1 An integrated stepped system of care