

Shared Commitment 6: More integrated health service delivery

This Shared Commitment to Action seeks to achieve:

- *continuity of care and integrated pathways between general health and specialist mental health, drug and alcohol services*
- *separate structures and processes only where they lead to better outcomes for the individual*
- *more seamless access to the full spectrum of services and supports required for holistic care, with no wrong door*
- *primary health care workforce equipped with sufficient support, knowledge and information to ensure appropriate treatment, care or referral.*

Actions

Queensland Health undertook a range of activities to identify and reduce systemic barriers between the general health and specialist mental health and drug and alcohol services. This work sought to remove barriers to accessing services, achieve a more seamless service experience, and better outcomes for people accessing these services.

State policy direction

[Connecting care to recovery 2016-2021: A plan for Queensland's State-funded mental health, alcohol and other drug services](#) (Connecting Care to Recovery) provides direction for service planning and service delivery across Queensland over five years. Connecting Care to Recovery emphasises the need for more effective collaboration, coordination and integration across and between programs, services and providers in our state-funded mental health, alcohol and other drug service system. It also recognises the need for effective partnerships with other health and social service sectors, to holistically meet the needs of individuals, their families and carers experiencing mental health and alcohol and other drug issues.

Service integration

Service delivery models

In 2016-17, the statewide Mental Health Alcohol and Other Drugs Clinical Network undertook a project to review the current state of integration between mental health and alcohol and other drug treatment services within Queensland Health. The project also defined principles for mental health and alcohol and other drug service integration which focused on values, collaborative work approaches, structural factors, and workforce.

Service integration coordinators

Queensland Health continued to provide funding to support the employment of 20 Service Integration Coordinators (SICs) in 13 Hospital and Health Services across Queensland. In 2016-17, the SICs continued to focus on supporting people with severe mental illness and complex care needs to access a range of clinical and community support services which are tailored to meet individual needs and assist people to live meaningful lives in their community. SICs have had a focus on the transition of mental health clients to the National Disability Insurance Scheme (NDIS).

Step up step down facilities

As a priority action under Connecting Care to Recovery, Queensland Health is expanding the range of mental health service models across the care continuum through the development of new Step Up Step Down (SUSD) facilities for adults and young people. SUSD facilities provide subacute mental health bed-based services delivered in a community setting. Services are delivered as a collaborative partnership between specialist clinical and community support services, providing management and

stabilisation of people with a mental illness in a supportive and positive environment and with a focus on engagement or re-engagement with social, family, educational and vocational connections.

Administrative integration

Information systems

On 5 March 2017, version 2.3 of the Consumer Integrated Mental Health Application (CIMHA) was delivered to support the administration of the *Mental Health Act 2016*. This release delivered efficiencies in the Mental Health Act module by replacing paper forms with electronic and reducing data entry requirements. The release also provided new functionality for the Mental Health Court Liaison Service, by importing court list data daily from the Department of Justice and Attorney-General into CIMHA, replacing manual data entry processes.

A project to replace the existing Alcohol Tobacco and Other Drugs Information System, and integrate the required functionality into CIMHA was approved in January 2017. Use of CIMHA will allow Alcohol and Drug Services to benefit from existing features such as electronic documentation, and iPad compatibility.

Queensland general practitioners now have secure online access to patient health care information from Queensland's public hospitals through The Viewer. This includes access to information from CIMHA that has been shared with The Viewer.

The Integrated Mental Health Data Reporting Repository (IMHDRR) is a business intelligence solution that is iteratively developed to provide the foundation for improved analysis, reporting and dissemination of mental health-related data. IMHDRR also acts as a validation processing system for mental health collections. In November 2016, the annual Your Experience of Service (YES) survey data was incorporated into IMHDRR enabling substantial improvements in the timeliness and dissemination of YES information. Additional information from source systems, including CIMHA, was incorporated into IMHDRR in February 2017.