



SERVICE INTEGRATION AND REFERRAL MAPPING FOR MENTAL HEALTH AND ALCOHOL AND OTHER DRUGS

Summary Report

Purpose

This paper summarises significant findings of the *Service Integration and Referral Mapping for Mental Health and Alcohol and other Drugs: Regional Reports 2015* prepared by CheckUP on behalf of the Queensland Mental Health Commission. The regional reports cover Queensland's North West, Central West and South West Hospital and Health Service regions.

The report outlines perceptions of the levels of integration and referrals between a wide range of services that support people living with mental health problems, mental illness, problematic alcohol and other drug use, and those who have been impacted by or at risk of suicide.

Based on the views of front line service providers it also outlines what supports integration and effective referrals between services, and those factors that act as barriers.

Why is integration and effective referral important?

Many Queenslanders who experience mental health problems including alcohol and other drug issues have multiple needs. Some people access multiple services, for example health, housing, education, domestic and family violence support agencies. Navigating these different services can present a significant challenge for people experiencing multiple needs.

Integration improves access to services, supports continuity of care and improves the systems' ability to take a holistic view of a person's needs. Integration is considered one of the best ways of improving life outcomes particularly for those experiencing complex and multiple needs.

There is no one model of integration. Some people will require case management and others will simply need information about how to access other services, for example through a referral.

The need for improved integration to better meet these needs has been a focus for governments including the Queensland Government for many years.

The Commission's role is to drive reform towards a more integrated, evidence-based and recovery-oriented mental health and alcohol and other drugs service system. The need for better integration and coordination between services is a pillar of reform underpinning the *Queensland Mental Health, Drug and Alcohol Strategic Plan 2015-2019*. The Strategic Plan also includes actions for more responsive government services in order to meet the holistic needs of people experiencing mental health problems, mental illness and problematic alcohol and other drug use.

"The more we work together for the individual, the better off we are going to be. Rather than taking ownership of the client, instead get everyone involved."

Focus group participant, Central West Queensland region

About the report

The report was developed based on surveys and forums held in the North West, Central West and South West Hospital and Health Service regions.

The surveys and complementary forums assisted in gaining a better understanding of the level of integration and referral pathways between services. They sought to identify:

- the extent of integration and referrals between services
- the factors which support or act as barriers to effective integration and referrals between services
- the views of service providers about whether the current service levels were meeting need
- areas of good practice.

Who provided input into the report?

Ninety-one services responded to the survey and 35 people representing 23 organisations attended forums held in Mount Isa, Longreach, Roma and Charleville.

Front line workers involved in the surveys and forums delivered a wide variety of services and including government and non-government service providers from the health, alcohol and other drugs, sport and recreation, domestic and family violence and family support services.

Seventy-eight per cent of services surveyed provided mental health and/or alcohol and other drugs services. Just less than three quarters of services indicated that their services regularly provided direct intervention or support for people at risk of suicide.

Significant findings

Referrals and working with other services is an important way services provide support to those experiencing mental health and alcohol and other drug problems. Service providers who used referrals indicated they used warm or supported referrals and the majority keep a central record of referrals and monitor the effectiveness of the referrals they make.

Every region is different but service providers across all three regions which participated in the surveys and forums identified a number of key themes and issues.

What supports service integration and referral?

Service providers indicated that service integration was supported by:

- Strong individual relationships between workers
- A dedicated case coordinator or care coordination model
- Clear internal policies and practices.

“If I know someone in an organisation and can trust them, I’m a thousand times more likely to refer to them. I know I can pick up the phone and say ‘I’ve got this person, do you think you could fit them in?’”

Focus Group participant, North West Queensland region

What are the barriers to integration and effective referrals?

Many services indicated that integration between services was harder or much harder than expected.

The main barriers to integration, identified by service providers were:

- Lack of access to services due to distance or cost
- Lack of access to specialist services
- Lack of services to refer to
- The ability of the person being referred to take up the referral or being reluctant to do so.

“Integration has to happen for the person – a person-centred approach – so the services the person needs are available to them in a holistic way. It’s also about organisations collaborating and working together to make the best use of available resources and not duplicating work. It’s about identifying what’s working well in the community and if something isn’t, problem solving together, and if there is a gap in services, doing something together that might address that gap.”

Focus Group participant, South West Queensland region

What can be done to improve integration and referrals?

To improve service integration and referrals, service providers indicated that there is a need to:

- Build relationships
- Hold interagency forums or regular meetings with key agencies
- Promote their own agency’s role and functions
- Provide training or resources
- Develop localised tools or systems which providers can access information about other services
- Develop local and shared resources.

Next steps

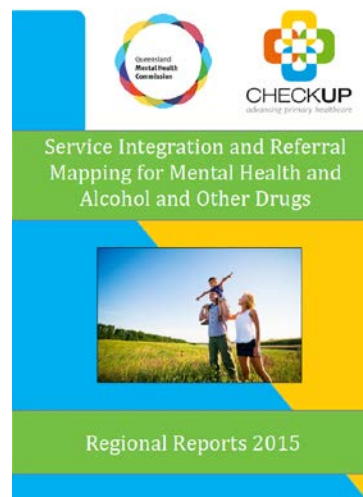
The report will provide an important evidence base to inform the Commission's work to drive reform towards a more integrated, evidence-based, recovery-oriented mental health and alcohol and other drugs service system. It will also inform implementation of the Strategic Plan including the development of the Queensland Rural and Remote Mental Health and Wellbeing Action Plan.

The findings from the report can also help inform local actions and efforts to provide holistic support to people living in the three regions. While this paper has summarised the findings across all three regions, there are a number of differences between the regions reflecting the diversity of needs and the unique way service systems operate in communities. The report provides detailed findings from each region.

To support local action, the Commission has provided the report to the Western Queensland Primary Health Network; the North West, Central West and South West Hospital and Health Services and to the service providers who participated in the project.

Over the coming year the Commission will be considering how to undertake research to examine the experiences of those seeking help and in particular how to improve their ability to take up referrals.

To read the detailed report visit
www.qmhc.qld.gov.au



Further information

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