Northern Mental Health Emergency Care: Distance no Barrier to Timely Mental Health assessment

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Background and Aim

The provision of specialist mental health clinical care is particularly challenging in rural and remote areas as access is limited by distance, isolation, limited public transport options and difficulties recruiting to and retaining a specialist mental health workforce in these areas. The NSW Government’s response to the living well – Strategic Plan (Mental Health Commission of NSW, 2014) announced funding for the establishment of a new mental health resource hub staffed by mental health professionals, operating 24 hours a day, to support the rural and remote communities of northern NSW.

The NMHEC-RAP is a joint initiative between Hunter New England Local Health District, Mid North Coast Local Health District and Northern NSW Local Health District.

Team members

• Sponsor/s (Guidance Team)
  Dr Marcia Fogarty, Executive Director Hunter New England Mental Health
  Ms Leanne Johnson, General Manager Hunter New England Mental Health
  Dr Richard Buss, Executive Director Mental Health Northern NSW LHD
  Mr Allan Pretty, Executive Director Mental Health Mid North Coast LHD

• Project Team
  Ms Jay Jones, Project Coordinator HNELHD
  Ms Alison Renwick, Project Officer NNSWLHD
  Mr Warren Martin, Project Officer MNCLHD
  Dr Rahul Gupta, Clinical NMHEC-RAP

Link to National Standard or Strategic Imperative

This project aligns with:
National standard 1 - Governance for safety and quality in health service organisations.
National standard 2 - Partnering with consumers
National Standard 6 Clinical handover,

Literature review (list articles reviewed)

Saurman E, Kirby S, Lyle D. No longer flying blind: how access has changed emergency mental health care in rural and remote emergency departments, a qualitative study. BMC Health Services Research. 2015 Vol 15:156

Driver Diagram

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Team members

• Project Sponsor/s (Richard Buss/NHWLHD)
  Dr Michele Fogarty, Executive Director Hunter New England Mental Health
  Lawrence Johnson, Peter Kemp
  Project Manager - Alison Renwick
  Consumer - Elizabeth Pearson
  Project Coordinator - Jay Jones
  Project Officer - Alison Renwick (NNSW LH)
  Project Officer - Warren Martin (MNCLHD)

• Project Team
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  Ms Alison Renwick, Project Officer NNSWLHD
  Mr Warren Martin, Project Officer MNCLHD
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Solutions

Training from Senior Clinical Leaders for ED Staff on EMR Troubleshooting
Increase AGES & QM Tool Access
Family Nurse Doctor and staff in MH Toolkit and MH Act (2007)
Liaison with Local LHD’s to coordinate
Discuss and review with ED Executive
Develop MOU with NNSWLHD to provide ongoing training
NHMRC and NNSWLHD evaluate effectiveness of training
Discuss at team meetings and develop action plan
Identify champions in group
Healthcare enhanced outreach sessions
Training provided by NSW Institute of Psychiatry
Top up current 1.77 MH staff to provide telehealth assessments to rural & remote ED’s
Utilise Telehealth to provide assessment to MH patient in Distant area via MH professional 24/7 service
Increase on call Psych availability after 10pm & make access to subs to ED

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Testing a Solution via a PDSA Cycle:

1. Plan your change:
   What did we test?
   The successful completion of a mental health assessment by telehealth.
   Who did it?
   - On-duty mental health professional
   When and where was it done?
   20 August 2016 on duty at the hub
   Date: What did we measure?
   - Satisfaction of assessment requested
   - Time constrained
   - Ambiguity
   - NPE
   - Plans Feedback provided to ED
2. Carry out your change by observe & measure:
   - The data was collected on a TPR spread sheet and the assessment was recorded in the EMR
3. Act on the data:
   Continue to provide ongoing training for ED staff
   - Consult with staff to discuss problems/issues and develop action plans
   - Provide feedback to staff regarding the process and results
4. Study the data & anecdotes:
   - The data demonstrated that we had reduced waiting time to less than 4 hours and increased the speed of the process to flow the patient away from their home town
   - No learn that MH professional in Hub require more support in doing assessments via telehealth

Hourly LOS Prior and Current For NMHEC-RAP ED’s

Musselbrook  Grafton  Byron  Kempsey

Prior LOS  Current Loss