# Police Ambulance Early Access to Mental Health Assessment via Tele-health (PAEAMHATH)









2015/16 Method of Separation for Patients

Transported by Police & Ambulance (46% not



hey've never been disrespectfu

or anything like that to our family, but there is a different

level of understanding. What am I

trying to say? There's helplessness

to how they respond because they

don't understand and don't have

the time or the training

MC. Carer

Ambo's respectful
Not being admitted

Issues raised from patient interviews pre

Jay Jones Hunter New England Local Health District, David Horseman NSW Ambulance, Tony Townsend NSW Police Force, Liz Newton Hunter New England Local Health District, Beth Gow Hunter New England Local Health District

## Case for change

When a patient is having a Mental Health (MH) crisis, being transported to hospital when you don't need to be is traumatising, and can significantly impact how well and

Taking emergency services out of area for unnecessary transportations to hospital of people in MH crisis, is a drain on time, money and human resources. It also leaves small communities, with limited emergency services in a vulnerable position

By providing Police & Ambulance with the equipment to enable patients to receive a Mental Health Triage in the community via telehealth with a Mental Health Professional, could limit the risk of trauma, the drain on Police & Ambulance resources and ensure people are receiving responsive care. By supporting Police & Ambulance with advice and referral recommendations we build capacity and partnerships in the community

Within the Hunter New England LHD between Jan 2014 & Sept 2015 LHD NSW Ambulance transported 1765 Mental Health Patients to Calvary Mater Hospital. NSW Police were involved in 683 incidents. Many of these Patients were NOT admitted to

### Why are we doing this:

- ✓ Improve the patient and carer experience and reduce the risk of trauma
- Reduce the number of unnecessary transportation to hospital of Mental Health
- ✓ Enable Police and Ambulance to stay in their community for other emergencies

### Consequences if we don't:

- Patients will continue to experience a frustrating and stressful first contact with **Emergency and Mental Health Services**
- Unnecessary transportation of Mental Health Patients will continue
- Emergency services leaving areas at risk due to reduced emergency services

To provide the right care, at the right time, in the right place to Mental Health Patients (within scope) by providing alternative care pathways and reducing their unnecessary transport by Police and/or Ambulance to the Calvary Mater Hospital

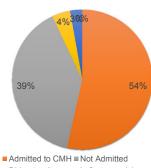
- · To reduce the unnecessary transportation of those Mental Health Patients within
- Professional who will provide recommendations about care to the patient within 12 months of implementation

# A wide range of diagnostic activities were



# **Results** (CMH – Calvary Mater Hospital, MHP – Mental Health Patient)

Transport of MHP within PAEAMHATH pilot area who did not receive a PAEAMHATH



Transport of MHP within pilot area who did receive a

PAEAMHATH triage to CMH

■Total PAEAMHATH triages ■ Safe to stay at home

Did not wait

Police and/or

Ambulance arrive

and complete

checklist to

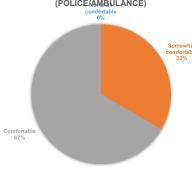
determine if patient

eligible for a

PAEAMHATH triage.

Patient provides

HOW COMFORTABLE DID YOU FEEL USING THE TELE-HEALTH EQUIPMENT? (POLICE/AMBULANCE)



PAEAMHATH TRIAGES INITIATED BY

**Mental Health** 

professional

provides triage to

patient via an iPad

using tele-health

Emergency staff who participated in interviews/process mapping meetings

Immediate response for the I could see the client and Were the Police and/or Ambulance satisfield with your recommendations? make a more accurate (MHP) mental health assessment MH professional



Extremely satisfied



contact with ? Feedback ASAP mental health Police Ambulance

safe to stay at home and will be followed up by either Community Mental Health Team or

# Sustaining change

- ★ Succession planning/exit strategy
- ★ Quality improvement cycle, re-visit staff and patients to gauge acceptance of process
- ★ Build into process and policy documents of services & Model of Care and Memorandum of Understanding between agencies
- ★ Engage with key staff within each organisation
- ★ Ensure Sponsors play an active role to enhance sustainability
- ★ Include in staff rounding and building cross agency relationships
- ★ Regular re-fresher/update training
- ★ PAEAMHATH be a standing agenda item for staff meetings
- ★ Meetings with Health Economist and Research Officers
- ★ Integrating the Telehealth technology into other devices currently used by Police and/or Ambulance

# **Acknowledgements**

Patient or

carer call

Triple Zero

■ Admitted to CMH

**New Patient Journey** 

■Left at own risk

Leanne Johnson General Manager, Mental Health (Sponsor)

Mel Willis/Nicole Manning, Redesign Leads

Detective Superintendent Chris Craner & Detective Acting Superintendent Wayne Humphrey NSW Police Force (Sponsor)

Chief Superintendent Jeff Hescott

Mental Health Contact Centre staff who participated in process mapping

Liz Bosworth, Volunteer Manager,

Patients/Carers who participated in interviews

If YES Police

and/or Ambulance

contact the Menta

**Health Contact** 

Centre via

designated

telephone number

If NO, patient

transported

Samuel Smith, MH Volunteer and Consum Front Line Police and Paramedics



provides

to Police and/or

**Ambulance** 

Patient needs

further

is transported to

hospital

### Contact

Jay Jones, Project Co-ordinator Jay.jones@hnehealth.nsw.gov.au

The PAEAMHATH project has shown that working in collaboration creates a platform that best meets the needs of patients. PAEAMHATH facilitates a culture of person-centred care that incorporates the needs of families

The PAEAMHATH project will enhance the ability of Police, Ambulance and Health Services to deliver Mental Health care throughout Australia, however the project is expected to provide the most benefit in the more regional, rural and remote areas of the country where patients do not have access to or choice of Mental Health care.

