
Enhancing the QAS's first response to people experiencing a Mental Health crisis

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Service Improvement

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Summary

The assessment and care of people experiencing a mental health crisis prove a challenge for Paramedics on scene, in people's homes and into the Emergency Department (ED). These often-

complex presentations may include complicating factors including drug and alcohol misuse, intellectual disability, acute behavioural disturbances and anti-social behaviours. The Queensland Ambulance Service (QAS) has implemented a number of initiatives to support the development of more appropriate responses to people experiencing a mental health crisis, including trialling a program of mental health clinicians working with paramedics co-responding to people experiencing a mental health crisis in the community.

Key dates

Feb 2020

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Implementation sites

West Moreton, Metro South and Gold Coast HHS

Partnerships

The QAS and Queensland Health - local Mental Health Services. The QAS and QPS - to ensure efficiencies between co-responder models.

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Aim

To provide timely and thorough mental state and risk assessment with management plans and treatment plans for people in their own home, using their own resources and support systems. This approach has many identified benefits for consumers, carers and the community as a whole. The response on the ground is similar to the assessment which would be conducted in ED and existing resources for the person can be utilised and as the outcomes indicate, are staying in their own homes.

Benefits

It is this collaboration which has produced efficiencies throughout the health system in decreased presentations to ED and if further mental health (MH) treatment is required, the person will have a seamless entry into the service. Additionally, the continuing collaborations with the broader sector will be imperative to the continued success of the program. Working with the Queensland Police Service (QPS) to refine dispatch and appropriate responses is essential. Joint training initiatives and dialogue are underway at a local level to ensure that program is a success.

Background

It is a complex patient cohort - often involving drug and alcohol misuse or intellectual disability, acute behavioural disturbances and anti-social behaviours. QAS has implemented a number of initiatives to support development of more appropriate responses incl a trial program of mental health clinicians working with paramedics to co-respond. Timely and thorough assessment with treatment plans. It is similar to an ED assessment.

Solutions Implemented

The QAS Mental Health Co-responder service saw a Senior Mental Health Clinician paired with a QAS Paramedic to respond to people experiencing a mental health crisis situation. Providing timely and thorough mental state and risk assessment with management and treatment plans, for people in their own home, using their own resources & supports has many identified benefits for consumers, carers and the community as a whole. The response on the ground is similar to the assessment which would be conducted in ED and existing resources for the person can be utilised and as the outcomes indicate, are staying in their own homes.

Evaluation and Results

Normal qualitative and quantitative analysis will be undertaken to evaluate the efficiencies of the service for providing quality and responsive care to consumers; in a timely and cost effective manner. Recent quantitative data reveals that over 70% of people seen by the QAS Mental Health Co-responder have been assessed and treated in their own homes, without being transported to the ED.

12-week review:

N = 228 cases

median age = 29 years

gender = 65% females

199 = unique consumers

Not transported to hospital = 160 (70.2%) Busiest day = Monday 28.1%

First/single response = 50% of scenes

Lessons Learnt

An unexpected outcome was, even in a short period of time, is the relationship between the QAS officers and the MH clinicians. One MH clinician described it, "as the best job in the world". Paramedics report an increase in their skills around responding to MH crisis situations, increased confidence and knowledge about the sector.

This relationship is key to the success of the program. Appropriate responses can only be achieved with local area knowledge and links to the system.

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