Referral Pathway MHNIP- Care Coordination

St George Division of General Practice

Initial Contact
- Community Mental Health Service
- GPs
- Personal Helpers and mentors
- NGO's
- Psychiatrist
- DEWR supported programs
- Justice system
- Housing

Entry Criteria for MHNIP
- Patients with a diagnosis of a mental health disorder;
- The disorder needs to have resulted in significant disability, in terms of the person's social, personal and occupational functioning;
- The person will have experienced at least one episode of hospitalisation for the treatment of their mental disorder, OR be at risk of requiring hospitalisation;

GP makes direct referral to Mental Health Nurse (MHNIP)

The General Practitioner develops a **Mental Health Treatment Plan** for the eligible patient, may be constructed in collaboration with Mental Health Nurse

Community Coordinators
- Personal helpers and mentors
- Housing & support initiative
- Recovery & Resource Services

The Mental Health Nurse
- Establishes a therapeutic relationship with the patient;
- Maintains links and undertakes case conferencing with general practitioners, allied health workers, psychiatrists, psychologists, etc
- Coordinates services for the patient in relation to general practitioners, psychiatrists and allied health workers, such as psychologists, including arranging access to interventions from other health professionals as required
- Provides information on physical health care to patients
- Administers, monitors and ensures compliance by patients' with their medication; and
- Liaises closely with family and carers as appropriate

Referrals/Connections
- Health
- Housing
- Employment
- Education
- Finance/income support
- Community groups
- Living skills programs
- Respite
  Day to Day Living

The GP regularly **Reviews** the Mental Health Treatment Plan in collaboration with Mental Health Nurse