



Government of Western Australia  
Mental Health Commission

## WA PRIMARY HEALTH ALLIANCE (WAPHA)

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Date: 11 November 2020  
Location: Teams/Virtual  
Attendees: Amanda Hughes, Head of Policy, MHC  
Natasa Dale, Assistant Director Strategic Policy, MHC  
Learne Durrington, Chief Executive Officer, WAPHA

- AH outlined the 6 draft strategies from the draft framework – and promised to send the draft for feedback of any major issues.
- Learne highlighted the fundamental importance of building relationships with young people, to ensure positive outcomes for individuals.
  - As well as clinical competence, clinicians need soft skills to enable relationship building and engagement with young people. This can be a form of early intervention and prevention.
- More support is required for families, who are supporting young people - particularly young people who are unwell (but not necessarily acutely unwell).
- There is a chasm between primary mental health (GPs and headspace) and the Child and Adolescent Mental Health Service (CAMHS).
  - There is a perception amongst GPs that CAMHS is inaccessible to many young people. GPs have articulated it as “heartbreaking” that emergency departments are the only option if GPs are unable to provide necessary support within the primary care setting.
- If a young person doesn't have a successful / positive experience when seeking help, it is unlikely they will seek help again.
- There is a workforce need for clinicians with sub-specialisation in working with young people (particularly by psychologists).
  - At the moment, many clinicians only work with adults, or specialise with “very complex young people”. But all the other young people with mental health issues, that aren't complex, need a workforce (psychologists) that are specialised in working with young people.
- Approximately 20 headspaces in WA.
  - All of the headspace services have waitlists. Demand has increased, mostly from more complex young people.
  - Psychologists in headspace usually move onto the WA Country Health Service (WACHS), as WACHS pay more.
  - Geraldton headspace have just done a review of waitlist (approx. 40 people). None are eligible for CAMHS, and their support needs are too complex for headspace.
- Co-location of WACHS and headspace, particularly in regions, would be extremely useful to help people and the system flow better.

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- The Youth Affairs Council of WA (YACWAs) recent survey of young people, which reported a 91% decline in young people's mental health raises some topics for further consideration:
  - Will we see this high percentage taper off with the resolution of COVID, or will it be sustained over a longer period? Leanne thinks the tail of the curve will be the most problematic.
  - Has the distress young people have experienced been caused by the impacts of COVID or have the impacts of COVID exacerbated individuals' emergent mental health issues?
- Young people are accessing digital mental health (i.e. eheadspace, eorygen etc).
- GPs and psychologists have been using telehealth (phone), but post-COVID, many are reverting back to *face to face* consultations.
  - Many clinicians are only comfortable doing telehealth consultations, after a face to face rapport/plan has been built between clinician and consumer.
- From a system perspective, a soft entry is needed to ensure seamless transition/flow.
- Investment needs to be realigned, not only new items.
- Barriers to manage demand, and system navigation are some issues that can be worked through that doesn't require significant new expenditure.
- There are three things that if done together significantly improve the trajectory of young people at a population level:
  - Care coordination (WAPHA funds care coordinators in the South West for older adults which is showing very good results – the service cuts across the whole continuum of hospital, community and social supports.) In the YPPF context this would be a person who helps a young person and their family navigate the system – from outside CAMHS – possibly from primary care.
  - Social connections (not via social media) – which build resilience
  - Employment/meaningful activity.

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