



Community Mental Health Step up/Step down Program

Frequently Asked Questions
June 2017

What is a community-based mental health step up/step down service?

Community-based mental health step up/step down services provide vital assistance for people with mental health issues. The services aim to support people safely in the community and close to their personal supports including family and friends. Without step up/step down services, those that would be eligible for the services live in the community without the supports they need to aid in their recovery.

The services provide short term, residential support and individualised care for people following discharge from hospital, or those experiencing a change in their mental health to avoid a possible hospitalisation. Step up/step down services aim to provide timely, intensive support which is responsive to the individual's needs, assisting them to develop and/or implement their personal recovery plan.

Why are they called step up/step down services?

There are two pathways into the services. Access may be by 'stepping up' from the community when an individual feels they would benefit from additional programs and activities in a supportive environment designed to avoid an admission to hospital. Alternatively access may be by 'stepping down' from a period of treatment in a mental health inpatient unit (in hospital) to allow continued treatment in a supportive environment aimed at achieving further symptom reduction and personal recovery.

What services are provided at a step up/step down service?

Step up/step down services provide a combination of support services:

- Psychosocial support is provided 24/7 by the non-government organisation managing the service. These activities assist in meeting personal goals and build resilience, and include a range of interventions that aim to reduce the impact of a person's symptoms and to prevent the relapse of illness. This may include mental health counselling, education, spiritual support and group support.
- Mental health clinical support programs and activities, which are usually provided through Public Mental Health Services. These are therapeutic in nature, and involve clinical teams visiting the step up/step down service to provide the clinical services required.

Step up/step down services consist of multi-disciplinary teams including specialist mental health clinicians, as well as other workers such as art therapists and peer support workers.

What does 'recovery' mean?

Personal 'recovery' is defined as 'being able to create and live a meaningful and contributing life in a community of choice with or without the presence of mental health issues'¹. It is acknowledged recovery is personal and means different things to different people.

¹ Australian Department of Health, A National framework for recovery-oriented mental health services 2013, Chapter 3.

Why are step up/step down services needed in our community?

With one in five Australians affected by a mental health issue each year, access to appropriate community based services that help people recover or manage their mental health issues is essential.

In December 2015, the Mental Health Commission released the Western Australian Mental Health, Alcohol and Other Drug Services Plan 2015–2025: Better Choices. Better Lives (the Plan). The Plan outlines the optimal mix and level of services required to meet the needs of Western Australians over the next ten years. The Plan has identified the need for more community based contemporary mental health services.

It is recognised that there is a need to provide those experiencing mental health issues with the support to effectively transition from hospital into the community, as well as providing additional support to individuals in the community to enable them to maintain their usual way of life and reduce their need for admission into hospital.

People accessing the step up/step down services are not acutely unwell patients and therefore do not require hospitalisation. Providing more community-based services is aligned with contemporary best practice in mental health service delivery.

A copy of the Plan can be found on the Mental Health Commission's website:
<http://www.mhc.wa.gov.au>

Where are step up/step down services currently operating?

The provision of step up/step down services is not new. Examples of similar services can be found in most states of Australia. Victoria uses the Prevention and Recovery Care (PARC) model of service that has been in operation for more than 12 years. New South Wales has been operating a 10 bed service located in Broken Hill since 2013.

There are two services currently operating in Western Australia. These are located in Joondalup, which opened in May 2013 with 22 beds, and in Rockingham, which opened in October 2016 with 10 beds. Step up/step down services are currently being planned by the Mental Health Commission for Karratha (6 beds), Bunbury (10 Beds) and Broome (6 beds). The State Government has also announced their commitment to provide step up/step down services in Kalgoorlie and Geraldton.

Further information on the Joondalup step up/step down service can be found here:

<http://www.neaminational.org.au/joondalup>.

Do step up/step down services work?

Step up/step down services are effective in reducing hospital admissions. The Joondalup step up/step down service commenced operation in May 2013 and in the period to December 2016, had 879 admissions (an average of 20 per month).

Of the 879 admissions, approximately 98% of people 'stepping up' were transitioned back into the community and did not require hospital admission (2% were admitted to an inpatient facility). Approximately 95% of people leaving from 'stepping down' were transitioned to the community (5% returned to an inpatient facility).

Who is eligible to stay in a step up/step down service?

To be eligible for the service, a person must have a diagnosed mental health condition and currently receiving clinical care from a health service provider or General Practitioner (GP). Whilst not acutely unwell, the individual must be assessed as requiring an inpatient level of care to achieve their rehabilitation goals.

People who are eligible for the service are those that would benefit from short-term, intensive treatment and support. This includes people who are living in the community and require additional specialist mental health support and interventions to prevent the risk of further deterioration or relapse that may lead to admission to an acute mental health inpatient unit.

Those not eligible include those on remand, in prison, do not have a permanent place of residence or those that require alcohol and other drug rehabilitation.

Current services are primarily for adults aged 18 years and over, however in some circumstances the step up/step down service may accept young people aged 16 to 17 years on a case-by-case basis.

As support is provided for up to 30 days, all those eligible for the service must have their own stable accommodation to return to.

What type of mental health issues are people likely to have if they are accessing the step up/step down services?

People assessed as being eligible to use the service are not assessed on their diagnosed mental health illness but rather their need for the service.

However, some people accessing the service may have depression, anxiety, bipolar or a personality disorder.

Prior to entry to the step up/step down service, individuals undergo a rigorous assessment to ascertain their suitability for the service and its programs. This includes an assessment of risk in relation to the person, the other people using the service, and the local community.

How will the step up/step down service operate?

There is a Model of Service that outlines the key service delivery principles for step up/step down services. The Western Australian model is based on the Victorian PARC model that provides comprehensive assessment and ongoing management, and is underpinned by a focus on recovery, self-directed care and person centred services.

The services are supported 24 hours a day, seven days a week. The maximum stay is 30 days, however individuals may be extended for short periods on a case-by-case basis. The average length of stay is between 10-14 days. The referrals are managed by the service provider and due to the

limited nature of the length of stay, waitlists are rarely an issue.

Who can refer a person to a step up/step down service?

Step up/step down services are available to anyone living in Western Australia with a diagnosed mental health illness. A person accessing the service as a 'step down' may be referred by the inpatient treating team at a hospital.

A person accessing the service as a 'step up' may be referred in by a community treating team or General Practitioner (GP). In some instances individuals will be able to access the step up/step down service as part of their personal recovery plan and can self-refer at times when they feel they need the additional support the service can provide.

All referrals will be considered with reference to the service provider's specific eligibility criteria.

What is a 'recovery plan'?

It is a requirement that all step up/step down residents have a recovery plan that is overseen by clinical mental health professionals.

A 'recovery plan' outlines a person's life, health, treatment and medical goals and notes the daily activities the person needs to do to stay well/healthy. The plan will include details of 'relapse triggers', which are events or experiences that have contributed to a past setback. It will also include early warning signs that things are not going so well, a crises plan for difficult times and an exit plan.

What does a day look like for a resident?

Aligned with the recovery plan will be the development of the individual work plan.

This will include: the assessment of individual needs; monitoring of individual safety and wellbeing; practical assistance with activities of daily living; further development of relapse prevention plans; referral and linkage with supports that can be sustained on exit;

liaison with ongoing treatment providers, including with the individual's GP for ongoing general health needs; and the development of an exit plan. Family members will be involved where appropriate.

Individuals are encouraged to participate actively in daily living activities such as menu planning which promotes nutrition, preparing their own meals and cleaning the communal kitchen. Other activities may consist of: either group or one on one counselling; group activities such as yoga and other physical activity; arts and crafts; the use of a tennis court; gardening; and recreational activities. Individuals may also have family and friends visit them and some service providers will have visiting hours.

What happens to a person when they leave the step up/step down service?

Those leaving the service are involved in planning their departure from the program as part of their recovery plan.

The provider of the service will ensure facilitated ongoing care takes place such as follow up care from a public mental health service, non-government organisation, a private psychiatrist and/or a GP. Follow up calls will also be made 24 hours after leaving the step up/step down service, and in some circumstances at seven, 14 and 21 days after discharge.

In the event that an individual discontinues the program at a step up/step down service, the service provider will conduct a risk assessment with the individual, identifying possible risks, identifying a support plan, and discuss with the individual the reason for discontinuing the program.

An exit interview will also take place. The service provider will work with local mental health services to ensure the individual continues to receive the appropriate care.

How are step up/step down services different to a mental health inpatient unit?

There are a number of differences between step up/step down services and inpatient units. The main difference is that the people using a step up/step down service do not require hospitalisation.

These services are not an alternative for inpatient care for those that are acutely unwell and where individuals require significant clinical intervention and monitoring.

What level of security is provided at the facility?

All sites have staff available 24 hours a day, seven days a week. Provisions are put in place to secure the premises for uninvited visitors after hours. The service provider will establish their own policies and procedures regarding other security measures for the facility.

Have there been any community safety issues at existing step up/step down services?

There have been no reported incidents relating to community safety at existing step up/step down services.

The issue of resident, staff and community safety is of paramount importance in the delivery of all mental health services. Those suitable for the service are assessed as not requiring hospitalisation.

It is important to note that these services have been operating successfully for some time in Rockingham, Joondalup and in the Eastern States. The people who reside within the step up/step down service would otherwise be living in the community.

Research has demonstrated that similar services to the step up/step down model do not attract anti-social behaviours, in-part because of the permanent presence of staff. In addition, there is no evidence

to suggest that these type of services adversely impact on property prices in the area².

Are the step up/step down services noisy and do they have a lot of people coming and going?

Step up/step down services assist individuals in reducing stress from mental illness, and as such, a calming environment is required.

Although the services are open 24/7, each service provider sets their own visiting hours. For example, the Joondalup step up/step down service requires all visitors to leave by 9pm.

Are step up/step down services used as a respite service, for those who are homeless, or for use by people affected by drugs and alcohol?

Step up/step down services are not homelessness services, respite services or alcohol and other drug rehabilitation services. They are not an alternative to acute inpatient units, do not provide emergency or crisis accommodation services, and are not used as temporary accommodation whilst permanent accommodation is sought.

Those considered eligible for the step up/step down service must have a permanent place of residence to which they can return to following their stay.

Whilst it is acknowledged that some people living with a mental illness may use drugs and alcohol, people with alcohol and other drug use as their primary issue are not considered eligible for a step up/step down service. During their stay at the service, the person will be expected to abstain from alcohol and other drug use, other than prescribed medications under the direction of trained mental health professionals. The service provider will establish their own policies and procedures to

manage situations where people using the step up/step down fail to comply with this.

Are prisoners or people on remand able to use the step up/step down service?

Step up/step down services do not provide forensic services, therefore prisoners and people on remand would not be accepted into the step up/step down service. At the referral and assessment stage, a risk assessment is undertaken for all potential service users that considers the safety of the individual, other service users, staff and the wider community.

What community consultation processes are undertaken in relation to the step up/step down services?

To inform stakeholders and the broader community, the Mental Health Commission provides a number of consultation opportunities and community forums in the local area in which step up/step down services are planned. The Mental Health Commission also engages with key stakeholders such as Councils and community service providers.

The community forums provide an overview of the service and allow the community to ask any questions. The forums are generally advertised through a number of different means, including local media, local community groups, schools, direct mail, phone calls and emails.

In addition to these forums, the Mental Health Commission also establishes a step up/step down Project Control Group (PCG) for each service. The purpose of the PCG is to provide advice, guidance, assist with identifying priorities and issues, and support the operation of the step up/step down service. The PCG consists of representatives from the Mental Health Commission, health services and people with a lived experience such as a consumer and/or carer.

Where possible, the Mental Health Commission also seeks to appoint the community service provider early in the process. This allows the organisation to establish themselves within the community (if not already there) and to develop

² Galster, G, Pettit, K, Tatian, P.A, Santiago, A.M, & Newman, S.J., 1999. The Impacts of Supportive Housing on Neighborhoods and Neighbors in Denver. The Urban Institute. Washington.
Mental Health Law Project, 1989. The Effects of Group Homes on Neighboring Property an Annotated Bibliography. Washington.
Carey, S. Coyne, R., & Coyne, R. 1985. Effects of Group Homes on Neighborhood Property Values. American Association on Mental Deficiency. Vol 23, No.5. 241-24).

their relationships with their neighbours and community.

What factors are taken into account when selecting a site for a step up/step down service?

Residential locations are generally chosen for step up/step down services to enable people using the service to maintain their usual activities associated with independent living. They need to be located within proximity to the amenities that any general member of the community could expect. This may include access to suitable public transport, shopping and recreational precincts, so that people can engage within the community and develop their skills with activities of daily living.

How are the step up/step down facilities designed and built?

The building design takes into account the specific needs of the people using the service, including those with physical/sensory disabilities and those with different cultural needs.

The buildings are designed in a way to make those using the service feel at home, similar to that of a residential setting. They include individual units with a bedroom, bathroom, sitting area and laundry.

Generally, there are natural vegetation boundaries and fences. The design also takes into account the building's immediate surroundings to ensure that it maintains a similar relationship to other properties in the area and the overall environment.

Who determines the service providers for the step up/step down service?

The Mental Health Commission is responsible for funding and establishing step up/step down services on behalf of the Western Australian Government. The Mental Health Commission undertakes two processes to determine the providers of the service: open tender processes for the community service provider; and engagement of a clinical service from a Public Health Service Provider.

The psychosocial support programs and day-to-day operation of the services are procured through an open tender process via Tenders WA. The tenders are reviewed by the Mental Health Commission, and are rated against the criteria set out in the request document and in line with the Government's Delivering Community Services in Partnership Policy.

As the step up/step down services are delivered through a provider of the psychosocial support programs and the local clinical services, the development of a Memorandum of Understanding between the non-government provider and the health services is undertaken collaboratively to ensure there is clarity and shared understanding of their respective responsibilities.

Who can I contact for more information?

The Mental Health Commission welcomes feedback from anyone interested in step up/step down services. The Mental Health Commission is also available to answer any other queries about a step up/step down service. Further information by emailing the Mental Health Commission:

communitystepupstepdown@mhc.wa.au