Allied Health Brief Therapies Clinics: Collaborative care during suicidal crisis

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To pilot the implementation of the Allied Health Brief Therapies (AHBT) Clinic Model of Service within the Darling Downs, Metro South and West Moreton Health Services to support allied health mental

Summary

health staff deliver brief psychotherapeutic interventions to consumers at risk of suicide.
Key dates
Feb 2019
Nov 2019
Implementation sites
West Moreton Health, Darling Downs Health, Metro South Health
Partnerships
- Floresco, (part of Aftercare - community based NGO in Ipswich / Toowoomba) - Gundu Pa - Wynnum / Manly Community Health Centre, Metro South Health - Primary Health Networks (Darling Downs, West Moreton and Metro South)
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Aim

The aim of the clinics is to work collaboratively with consumers at risk of suicide, their carers and families to deliver timely, accessible brief evidence based psychotherapeutic services within three business days of referral from Emergency Department (ED) or Acute Care Teams (ACT).

Benefits

- AHBT Clinic Co-located Model of Service optimises consumer transitions between internal Hospital and Health Service (HHS) ED and mental health services as well as community and primary health care sector service providers
- Active engagement of consumers with suicidality during the highest period of risk, reducing potential for further escalation / deterioration and potential reduction in future use of limited HHS system resources
- Allied health mental health workforce that has capacity and opportunity to work to full practice scope resulting in higher rates of job satisfaction and staff retention

Background

Many people at risk for suicide attend a hospital ED seeking help for their distress, however resent reviews highlight the difficulty of meeting the complex needs of those presenting with suicidality within ED. During 2018, three AHBT clinics were established on a trial basis in three health services in Queensland; Darling Downs, West Moreton and Metro South. The clinics, located in the community (at Community Health Centres and NGO facilities) provide immediate, accessible and coordinated treatment for those presenting with suicidality. When assessed in the ED, consumers are referred to the Clinics within 3 business days, where allied health mental health staff work collaboratively with them, their families and carers to provide personalised psychotherapeutic support. The overall aim of the Clinics is to ensure consumers remain engaged and safe during their time of crisis and supported in their transition, as required, to a range of community, private and primary care-based service providers. The secondary aim was to provide opportunity for workforce to work to full scope in delivery of therapeutic interventions.

Solutions Implemented

The Allied Health Brief Therapies (AHBT) Clinic Model of Service was implemented at the three pilot sites and provided immediate and coordinated treatment to patients.

Evaluation and Results

A multisite mixed method, repeated measures approach was employed for the evaluation with a sample of 141 consecutive referrals from the three pilot sites. Key Results include:

- high rates of initial and ongoing engagement with consumers (72.9%)
- statistically and clinically significant improvement post clinic mean scores for consumers attending a minimum 2 sessions (n72) on psychological distress, suicidal ideation frequency / intensity and life functioning measures
- high rates of consumer satisfaction with therapeutic alliance and AHBT Clinic service provision
- reduction in ED presentations 3 months post AHBT Clinic referral
- no consumers took their own lives during AHBT Clinic treatment or post follow up period

Lessons Learnt

- Service re-design within existing resourcing requires support and buy in at all levels of the service - do not underestimate what can be achieved
- Working collaboratively across HHS services and public and community sectors can build good relationships and project success if informed by initial robust project planning and evaluation frameworks

References

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