Connecting Community and Mental Health Services

A Guide to Building Aligned and Accessible Referral Resources

headspace Ballarat - Youth Suicide Prevention Project

November 2024

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headspace National Youth Mental Foundation is funded by the Australian Government Department of Health & Aged Care

Acknowledgements

headspace Ballarat recognise and celebrate the diversity of the community within which we work. We acknowledge and respect the Wadawurrung people as the Traditional Custodians of lands that this community consultation was conducted. We value their cultures, identities, and continuing connection to country, waters, kin, and community. We pay our respects to Elders past, present, and to emerging leaders, and are committed to making a positive contribution to the wellbeing of Aboriginal and Torres Strait Islander young people, by providing services that are welcoming, safe, culturally appropriate, and inclusive.

headspace Ballarat would like to acknowledge those that may have a lived or living experience of suicide or may be experiencing bereavement due to losing a loved one to suicide.

We thank all participants identifying with such experiences for their strength in being part of this consultation and acknowledge that their voice is of great importance to the outcome of this project.

If you need to speak to someone urgently there are crisis support services available

Lifeline: 13 11 14 **Kids helpline: 1800 55 1800**

Contents

Resource Overview

This guide was created to support the development of mental health resource directories and service maps tailored to specific communities. It provides a step-by-step approach for service providers, community organisations, and local leaders who wish to create a comprehensive, accessible guide to mental health services in their area.

The purpose of this guide is to simplify the process of connecting individuals, families, and youth with the mental health support they need. By mapping local services and aligning them with community needs, this resource aims to bridge gaps in service accessibility and improve navigation through the mental health system.

Whether you are a mental health professional, community advocate, or organisational leader, this guide will equip you with the tools to build a connected, community-accessible mental health network. It serves both as a framework for collaboration among service providers and as a bridge to ensure that people seeking help can find the support that best matches their needs.

Background

Following a sharp increase in youth suicide in the Ballarat region between 2021 and 2022 the headspace Ballarat Youth Suicide Prevention Project (YSPP) was commissioned by the Western Victoria PHN to provide community engagement and scoping works to address this increase in our community through a number of targeted interventions.

Recognising the complexity of the local mental health landscape and its impact on youth suicide prevention, the YSPP initiated a series of Community Insights focus groups. These groups, comprised of young people, parents, carers, and mental health professionals, provided critical feedback on the barriers to accessing timely and appropriate mental health care. The active engagement of Community Insights focus groups, led to the creation of two pivotal resources: the ‘Ballarat Youth Mental Health Service and Referral Guide’ and ‘Where Can You Go for Mental Health Support in Ballarat’

The ‘Ballarat Youth Mental Health Service and Referral Guide’ serves as a comprehensive tool for professionals, detailing the available mental health services in the region, along with clear referral pathways and eligibility criteria. Meanwhile, the ‘Where Can You Go for Mental Health Support in Ballarat’ resource offers a simplified, youth-friendly guide, helping young people and their carers identify the appropriate level of care and how to connect with local services. Both resources were developed using the Initial Assessment and Referral Decision Support Tool (IAR-DST) to ensure consistency and clarity in service alignment not only locally, but also aligning to national standards.

Use of the Initial Assessment and Referral Decision Support Tool (IAR-DST)

The IAR Decision Support Tool and Guidance documentation, developed for Australian health professionals in the primary mental health system, supports consistent, evidence-informed initial assessment and referral processes. As new evidence emerges, it will be refined. Details on support levels are on page 13 of this document, and the tool and all supporting documentation can be found at https://iar-dst.online/#/ .

We recommend that where practical, services supporting clients with mental health difficulties consider adopting the IAR-DST to enhance referral efficiency and improve client outcomes.

Project Framework

Initial Needs Assessment

Before starting the project, conduct a comprehensive needs assessment to understand the local mental health landscape. This will help identify gaps in service navigation and assess the demand for new resources. Additionally, it will reveal if similar tools or resources already exist or are under development, ensuring efforts are not duplicated and resources are used efficiently.

Co-Design

Consultation and co-design with consumers is essential for ensuring the resource is relevant and user-friendly. If your service does not have a consumer reference group, consider partnering with organisations that do. Engaging consumers from the outset will enhance the resource's effectiveness and community uptake.

Community consultation and codesign should be present throughout the entire project but there are a few key milestones that consumers should be involved in including:

- Needs analysis.
- Service Mapping.
- Resource language layout, and graphic design.

Partnerships

Collaborating with other organisations is key to developing this resource. Partnerships not only provide additional support for the project but also foster a sense of unity within the sector, strengthening public perception of mental health services working together.

Infromation Gathering

Mapping of local services

The initial step in developing this resource is to map out local mental health services to identify those that should be included. In some regions, comprehensive service directories may already exist, which can serve as a useful starting point. In areas where no such directories are available, it may be necessary to gather this information from your local Primary Health Network (PHN) or mental health community of practice. This ensures that the resource reflects all relevant services and accurately supports navigation through the local mental health system.

Service Information Request

After mapping local services, identify agencies that offer low- or no-cost mental health support and accept direct public referrals. These agencies will be key partners in the project and should be approached with a Service Information Request.

This document will provide services with an overview of the Initial Assessment and Referral Decision Support Tool (IAR-DST) and guide them in aligning their programs to this framework. It includes a standard template for gathering program information, along with clear descriptions of each IAR-DST care level.

Given the important role schools play in supporting young people with mental health challenges, it's highly recommended to also engage local public, private, and alternative education providers to gather relevant information.

Depending on your existing relationships, you may need to meet with each service to explain the project, its objectives, and how their information will be used. You can use the Ballarat Youth Mental Health Services and Referral Guide as an example to clarify the project's scope.

To encourage participation, it's helpful for your organisation to fill out the request form as an example, providing transparency and building trust with partner agencies. As you receive responses, compile the results into the "Service Request Information" sheet of the Service Alignment Excel document for easy reference throughout the project development.

Organisation:	Headspace Ballarat				
Program Name	**Program Aim**	**Age Range**	**IAR-DST Ranges**	**Referral Pathways and Exclusions**	**Fee for service Y/N**
Headspace Core Program	Providing drop-in intake, assessment, and treatment for mild to moderate mental health	12-25	1,2,3	Walk ins to centre, no appointment needed. Online self and professional referrals	N
Headspace Specialist Youth Program	Intake, assessment, and treatment for complex presentations up to 6 months	12-25	4	Walk ins to centre, no appointment needed. Online self and professional referrals	N
Headspace Enhancing Mental Health Supports in Schools	Those attending public schools, intake, assessment, and treatment for 6 sessions	12-25	1,2,3	Referral pathways only through participating schools	N
Headspace Peer Work	Psychosocial support up to 6 sessions to achieve specific goals	12-25	1,2,3,4	Internal Referrals	N
Headspace Parent and Carer Peer Navigator	Intake and service referral support for young person and parent	Parent of young Person aged 12-25	1,2,3,4	Internal Referrals or triaged via Customer Service Officers	N

Example of completed service program list.

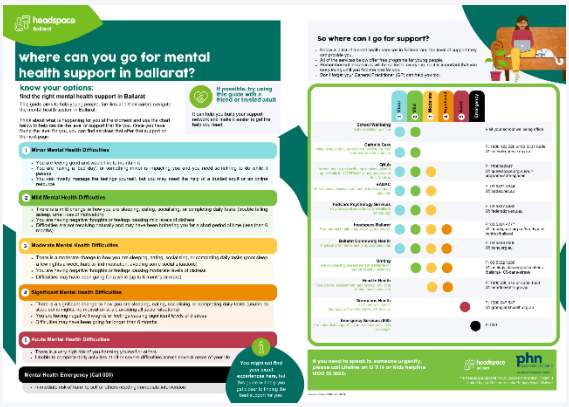
Resource Development

Resource Contents

The resource is made of two documents, *Where can you go for Mental Health Support* and the *Service and Referral Guide*. These documents share several key components and are both based on the same source data, strengthening the connection between them.

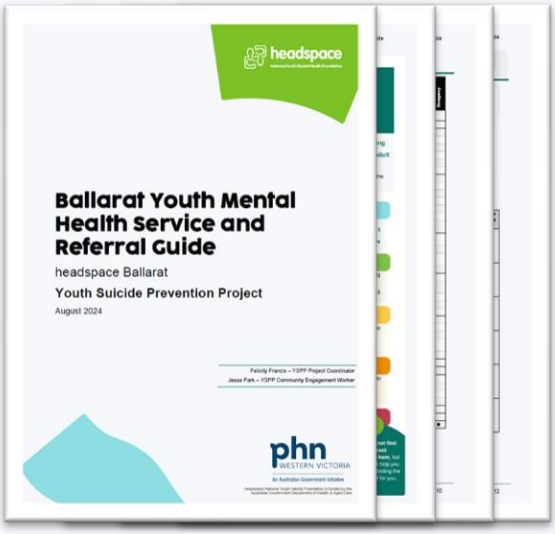
Where can you go for mental health support:

- Youth Self Triage Scale
- Scaled Service Directory



Service and Referral Guide:

- Telephone and online supports.
- Where can you go for mental health support?
- Service Quick list.
- Service and Referral List
- IAR-DST Levels and Criteria information



Resource Elements

Youth Self Triage Scale

Using the 5 domains of acuity set out in the IAR-DST a distilled list of equivalent dot points were created that address the level of distress and functional impact of each domain. This subjective scaling tool is designed to help young people and their supporters identify what level of support they may need and based on what level of emotional impact they may be experiencing.

The levels of acuity are set out below:

1. Minor Mental Health Difficulties

- You are feeling good and would like to maintain it.
- You are having a 'bad day', or something minor is impacting you and you need something to do while it passes.
- You can mostly manage the feelings yourself, but you may need the help of a loved one or an online resource.

2. Mild Mental Health Difficulties

- There is a mild change to how you are sleeping, eating, socialising, or completing daily tasks (trouble falling asleep, small loss of motivation).
- You are having negative thoughts or bad feelings causing mild levels of distress.
- Problems are not resolving naturally and may have been bothering you for a short period of time (less than 6 months)

3. Moderate Mental Health Difficulties

- There is a moderate change to how you are sleeping, eating, socialising, or completing daily tasks (poor sleep a few nights a week, hard to find motivation, avoiding some social situations).
- You are having negative thoughts or bad feelings causing moderate levels of distress.
- Problems may have been going for a while (up to 6 months or more)

4. Severe Mental Health Difficulties

- There is a severe change to how you are sleeping, eating, socialising, or completing daily tasks (unable to sleep some nights, no motivation at all, avoiding all social situations).
- You are having negative thoughts or bad feelings causing severe levels of distress.
- Problems may have been going for longer than 6 months.

5. Acute Mental Health Difficulties

- There is a very high risk of you harming yourself or others.
- Unable to complete daily activities at all or severe difficulties across several areas of your life.

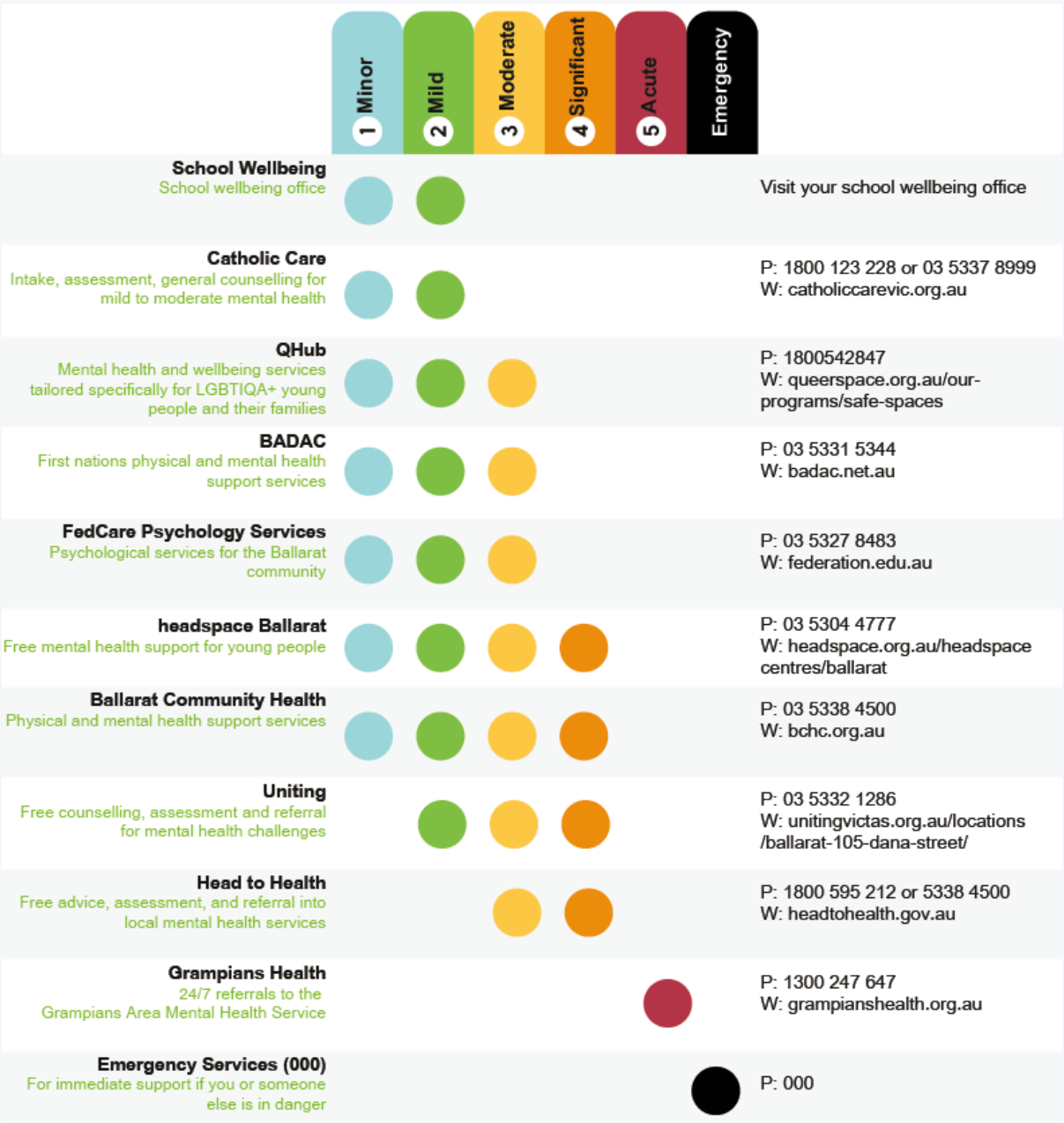
Mental Health Emergency (Call 000)

- Immediate risk of harm to self or others needing immediate intervention.

Scaled Service Directory

This is a list of the major services providing no-cost or low-cost mental health support that can be directly accessed by the public. This list includes contact information and specifies the levels of acuity each service supports according to the IAR-DST. It is also color-coded to match the Youth Self-Triage Scale for easy reference.

The order of services is organised by the level of acuity they support, from the lowest to the highest, to make it easier for users to find the most appropriate support based on their needs. This structure helps individuals and families quickly identify the best-fit services based on their current level of care requirements.



Service and Referral Guide

As this document is designed to provide scaling level of detail as it progresses allowing users to locate quick information at the start of the document and more detail towards the latter half.

For ease of reference, we chose to structure the document as such:

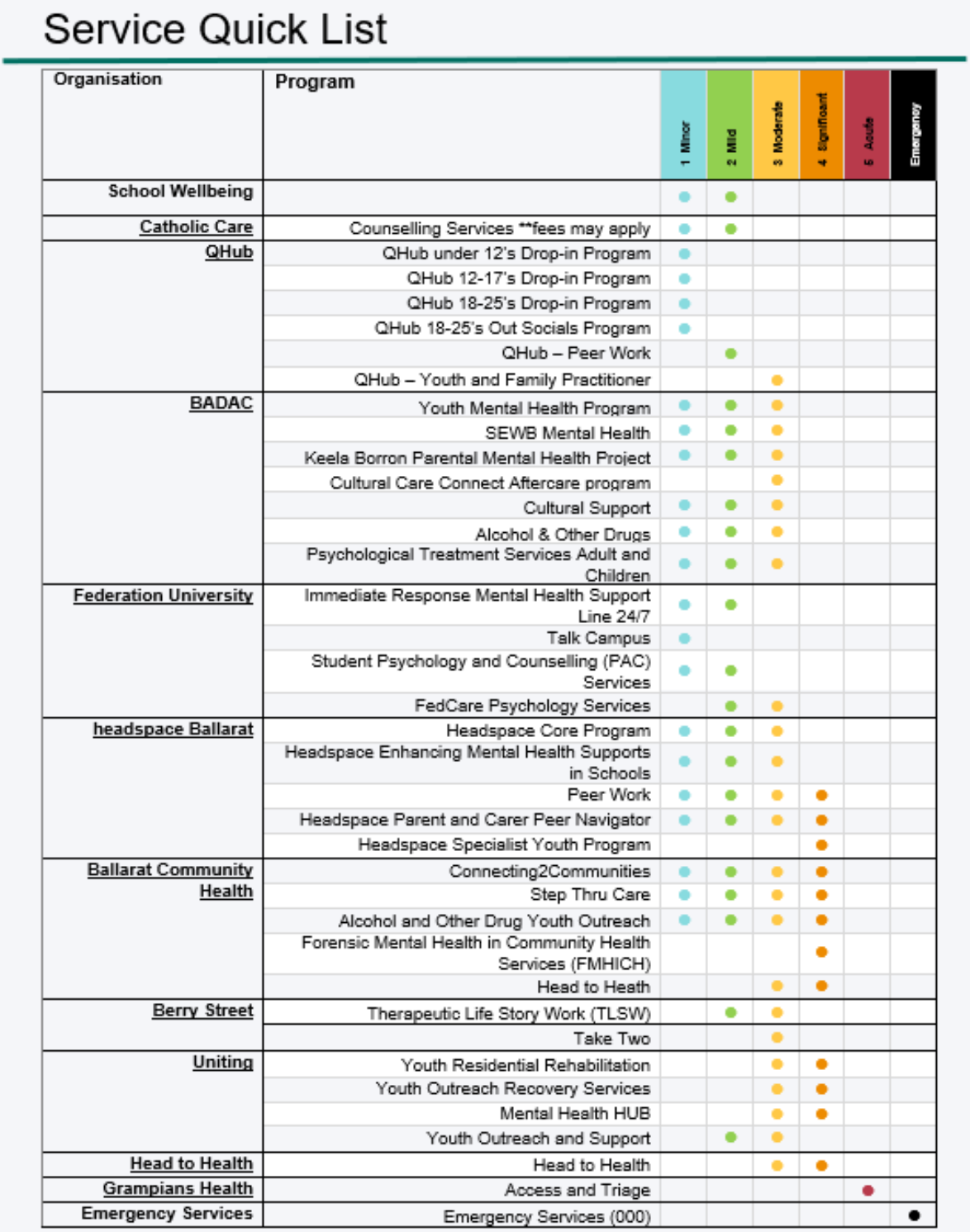
1. Contents
2. Acknowledgements
3. Overview of document
4. Telephone and online services.
5. Where Can You Go for Mental Health Support resource
6. Service Quick List
7. Service and Referral List
8. IAR-DST Levels and Criteria information

Telephone and online supports.

A one-page list of national telephone and online supports to provide in addition to referrals to in person supports in case of crisis or for support provision outside of in person service hours or while waiting for waiting for in person services.

Service Quick List

A concise overview detailing which services provide specific levels of care within their programs. This summary enables quicker identification of service levels and facilitates easier use of the Service and Referral List.



Service Quick List

Organisation	Program	1 Minor	2 Mild	3 Moderate	4 Significant	5 Acute	Emergency
School Wellbeing		●	●				
Catholic Care	Counselling Services **fees may apply	●	●				
QHub	QHub under 12's Drop-in Program	●					
	QHub 12-17's Drop-in Program	●					
	QHub 18-25's Drop-in Program	●					
	QHub 18-25's Out Socials Program	●					
	QHub – Peer Work		●				
	QHub – Youth and Family Practitioner			●			
BADAC	Youth Mental Health Program	●	●	●			
	SEWB Mental Health	●	●	●			
	Keela Borron Parental Mental Health Project	●	●	●			
	Cultural Care Connect Aftercare program			●			
	Cultural Support	●	●	●			
	Alcohol & Other Drugs	●	●	●			
	Psychological Treatment Services Adult and Children	●	●	●			
Federation University	Immediate Response Mental Health Support Line 24/7	●	●				
	Talk Campus	●					
	Student Psychology and Counselling (PAC) Services	●	●				
	FedCare Psychology Services		●	●			
headspace Ballarat	Headspace Core Program	●	●	●			
	Headspace Enhancing Mental Health Supports in Schools	●	●	●			
	Peer Work	●	●	●	●		
	Headspace Parent and Carer Peer Navigator	●	●	●	●		
	Headspace Specialist Youth Program				●		
Ballarat Community Health	Connecting2Communities	●	●	●	●		
	Step Thru Care	●	●	●	●		
	Alcohol and Other Drug Youth Outreach	●	●	●	●		
	Forensic Mental Health in Community Health Services (FMHICH)				●		
	Head to Heath			●	●		
Berry Street	Therapeutic Life Story Work (TLSW)		●	●			
	Take Two			●			
Uniting	Youth Residential Rehabilitation			●	●		
	Youth Outreach Recovery Services			●	●		
	Mental Health HUB			●	●		
	Youth Outreach and Support		●	●			
Head to Health	Head to Health			●	●		
Grampians Health	Access and Triage					●	
Emergency Services	Emergency Services (000)						●

Service and Referral List

A list of mental health services available in Ballarat, complete with contact details and referral pathways. Most programs are free of charge and accessible without the need for a GP referral.

Care was taken to ensure information in this list is accurate at time of publication but due to the ever-changing nature of the mental health sector, as time passes this information may require amendment and updating.

headspace Ballarat

Free mental health support for young people aged 12 – 25.

Address: 28 Camp Street, Ballarat, VIC, 3350

Phone: 03 5304 4777

Website: headspace.org.au/headspace centres/ballarat

Opening Hours:

Monday 9am – 5pm

Tuesday 9am – 5pm

Wednesday 9am – 7pm

Thursday 9am – 7pm

Friday 9am – 4pm

Programs:

Program Name	Program Aim	Age Range	Service Level	Referral Pathways and Exclusions	Fee for Service
headspace Core Program	Providing drop-in intake, assessment, and treatment for mild to moderate mental health	12-25		Walk-ins to centre, no appointment needed. Online self and professional referrals	Free
headspace Specialist Youth Program	Intake, assessment, and treatment for complex presentations up to 6 months	12-25		Walk-ins to centre, no appointment needed. Online self and professional referrals	Free
headspace Enhancing Mental Health Supports in Schools	Those attending public schools, intake, assessment, and treatment for 6 sessions	12-25		Referral pathways only through participating schools	Free
headspace Peer Work	Psychosocial support up to 6 sessions to achieve specific goals	12-25		Internal Referrals	Free
headspace Parent and Carer Peer Navigator	Intake and service referral support for young person and parent	Parent of young Person aged 12-25		Internal Referrals or triaged via Customer Service Officers	Free

Initial Assessmnet and Referral Decision Support Tool Levels

Level 1 (Self-Management)

Definition: services at this level of care are designed to prevent the onset of illness and are mostly focussed on supporting the person to self-manage any distress or symptoms. This level of care generally involves evidence-based digital therapies and other forms of self-help. A summary of the evidence-based digital mental health therapies and self-help services is available through the Head to Health website.

Care environment: services are easily accessible and available online, via telephone or in the community. Services may also be available in integrated settings (e.g., within schools, workplaces, and general practice).

Core clinical services:

This level of care is focussed on self-help activities. Clinical services are generally not required, however where they are involved, they should:

- Be focussed on monitoring, with capability to step up into other interventions as required.
- Include psychoeducation and information via a GP. The GP may also consider developing a MHTP (if consistent with Medicare Benefits Schedule).

Other clinical interventions that may be required:

- lifestyle interventions (e.g., nutrition, sleep, exercise, meaningful social connections), and
- group work.

Support services: additional services, if needed, are focussed on actively linking the person with services that can help to practically address any situational stressors (e.g., finances).

Referral criteria:

A person suitable for this level of care typically has no risk of harm, is usually experiencing mild symptoms and/or no distress/low levels of distress- which may be in response to recent social and environmental stressors. Symptoms have typically been present for a short period of time. The individual is generally functioning well and should be motivated to pursue self-management options. People experiencing a lack of motivation/engagement should not be referred to this level of care because these problems will work against involvement in self-management strategies. Additionally, Level 1 care is unlikely to be suitable for those with severe problems in their treatment/recovery history or very severe environmental stressors – each of these would usually trigger a referral to Level 3 care.

Level 2 (Low Intensity Services)

Definition: Low intensity services are designed to be accessed quickly (without the need for a formal referral e.g., through a third-party service or provider), easily (through a range of modalities including face-to-face, group work, telephone and digital interventions) and typically involve few or short sessions.

Care environment: services are easily accessible and available online, over the telephone or in the community. Services may also be available in integrated settings (e.g., within schools, workplaces, and general practice).

Core clinical services:

- Psychoeducation and information via a GP. The GP may also consider developing a MHTP (if consistent with Medicare Benefits Schedule).
- Evidence-based low intensity interventions (including online, telephone and face-to-face low intensity structured psychological services, or brief interventions delivered by mental health professionals).

Other clinical interventions that may be required:

- lifestyle interventions (e.g., nutrition, sleep, exercise, meaningful social connections).
- group work.

Support services: additional services, if needed, are focussed on actively linking the person with services that can help to practically address any situational stressors (e.g., finances).

Referral criteria:

A person suitable for this level of care typically has minimal or no risk factors, is usually experiencing mild symptoms/low levels of distress, and where present, this is likely to be in response to a stressful environment. Symptoms have typically been present for a short period of time (less than 6 months but this may vary). The individual is generally functioning well but may have problems with motivation or engagement that contraindicate a referral to Level 1 care. Where the person has experienced previous treatment for a previous episode, they are likely to have had a moderate or better recovery.

Complexity indicated by significant problems in Risk, Functioning or Co-existing Conditions should be considered as contraindications for referral to Level 2 care and trigger a referral to Level 3 or higher.

Level 3 (Moderate Intensity Services)

Definition: moderate intensity services generally provide structured, reasonably frequent, and intensive interventions (e.g., a defined number of psychological sessions delivered regularly)

Care environment: typically, community locations (e.g., consulting rooms), outreach into residential environments (e.g., aged care facilities, schools) or if appropriate, via telephone or videoconference (e.g., for people in remote communities), and clinician assisted e-therapies.

Core clinical services:

A comprehensive psychological assessment (if not already undertaken) is required for all individuals suited to this level of care.

- Evidence-based psychological interventions provided by a mental health clinician.
- Active GP management, mental health assessment (and development of a MHTP).

Other clinical interventions that may be required:

- community based psychiatry.
- clinical care coordination services within primary care (if more than 2 services are involved in providing care).

Support services: additional services, if needed, are focussed on:

- community supports (including peer support and social participation support).
- assistance to access support and advice relating to known environmental stressors.
- lifestyle interventions (e.g., nutrition, sleep, exercise, meaningful social connections).

Referral criteria:

A person requiring this level of care is likely to be experiencing mild to moderate symptoms/distress (that would meet criteria for a diagnosis). Symptoms have typically been present for 6 months or more (but this may vary). Initial assessment would usually indicate problems present in risk of harm, functioning or impact of co-existing conditions but not at very severe levels, which should trigger consideration of a referral to Level 5. People experiencing moderate to severe symptoms with mild to moderate problems associated with Risk, Functioning and Impact of Co-existing Conditions are usually suitable for this level of care.

Level 4 (High Intensity Services)

Definition: high intensity services including periods of intensive intervention that may involve multi-disciplinary support. Usually supporting people experiencing severe mental illness, significant functional impairment and/or risk factors.

Care environment: typically, face-to-face interventions in community locations (e.g., consulting rooms) or outreach to the person within their home or other environment.

Core clinical services:

A comprehensive psychological assessment (if not already undertaken) is required for all individuals suited to this level of care.

- Evidence-based psychological interventions provided by a mental health clinician.
- Clinical care coordination services within primary care (if more than 2 services are involved in providing care).
- Involvement of a mental health nurse.
- Community-based psychiatric care.
- Active GP management, mental health assessment, integrated physical health care (and development of a MHTP).

Support services: additional services are likely to be needed and may include:

- psycho-social disability support services (including peer support, daily living support, social skills training, and social participation support).
- community supports (including peer support and social participation support).
- assistance to access support and advice relating to known environmental stressors.
- lifestyle interventions (e.g., nutrition, sleep, exercise, meaningful social connections).

Referral criteria:

A person requiring this level of care usually has a diagnosed mental health condition with significant symptoms and/or significant problems with functioning. A person with a severe presentation is likely to be experiencing moderate or higher problems associated with Risk of Harm, Functioning, and Impact of Co-existing Conditions. Where problems are assessed as very severe in symptom, risk or functioning domains, a referral to Level 5 care should be considered.

Level 5 (Acute and Specialist Community Mental Health Services)

Definition: specialist mental healthcare usually includes intensive team-based specialist assessment and intervention (typically state/territory mental health services) with involvement from a range of different types of mental health professionals, including case managers, psychiatrists, social workers, occupational therapists, psychologists and drug and alcohol workers. This level also often includes more intensive care provided by GPs.

Care environment: typically, community locations with outreach to the person within their home or other environment. This level may also involve specialist mental health inpatient care within a hospital environment, community based intermediate care, sub-acute unit, or crisis respite centre.

Core clinical services:

For this level of care, the person is likely to benefit from psychiatric assessment and care, crisis management, and therapeutic interventions using assertive engagement strategies provided by a multi-disciplinary specialist team with outreach capability. Care should be provided in close collaboration with General Practice.

Support services: additional services are likely to be needed and may include:

- psycho-social disability support services (including peer support, daily living support, social skills training, and social participation support).
- community supports (including peer support and social participation support).
- assistance to access support and advice relating to known environmental stressors.
- lifestyle interventions (e.g., nutrition, sleep, exercise, meaningful social connections).

Referral criteria:

A person requiring this level of care usually has significant symptoms (e.g., hallucinations, avoidant behaviour, paranoia, disordered thinking, delusions) and problems in functioning independently across multiple or most everyday roles (work, education, parenting, volunteering) and/or is experiencing:

- Significant risk of suicide, self-harm, self-neglect, or vulnerability.
- Significant risk of harm to others.
- A high level of distress with potential for debilitating consequence.

Disclaimer

Use of this publication is not a substitute for professional knowledge and clinical judgement. Systems and processes for initial assessment and referral should consider the unique and personal circumstances of the individual client, including other health or social issues, their preferences and choices, and any risk or safety issues.

Use of this publication is at your own risk, and you must make your own assessment of its appropriateness for the environment and circumstances in which it is to be applied. The Department of Health assumes no legal liability or responsibility to anyone for the consequences of using or relying on the information included or incorporated in this publication.

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The Australia Government, National PHN Guidance Initial Assessment and Referral for Mental Healthcare – version 1.05, 2019 (updated 2023)

Update and Replication of this project

Mental health services exist within an ever-evolving landscape, with new programs, referral pathways, and support systems emerging regularly. As a result, it is crucial that this resource undergoes periodic updates and reviews to remain accurate, relevant, and effective. Regular updates ensure that any changes in service availability, program scope, or referral processes are reflected, preventing outdated information from hindering access to care.

Establishing a dedicated team or assigning responsibility to a lead organisation for these updates is key to maintaining the resource's usefulness. By collaborating with stakeholders and service providers, the project can stay responsive to local needs and sector changes. Additionally, implementing feedback from users—whether they are professionals, young people, or families—can highlight areas for improvement and ensure that the resource remains accessible and user-friendly.

Beyond local maintenance, this project offers a replicable framework for other communities. Organisations in different regions can adapt the approach, tailoring the service mapping and resource creation to their unique local contexts. By sharing the learnings and templates from this project our hope is other regions can replicate the successful elements while building on their local strengths and needs.

If your organisation replicates this project or adapts elements of this guide to create your own resources, we'd love to hear from you! Sharing your experience helps us understand the impact and reach of this work. Please feel free to contact us at yspp@headspaceballarat.org.au.

For enquires -

ysppp@headspaceballarat.org.au

or

info@headspaceballarat.org.au

phn WESTERN VICTORIA

An Australian Government Initiative

If you need to speak to someone urgently, please call Lifeline on 13 11 14 or Kids helpline 1800 55 1800.

If you need immediate support, call 000.

You can also get help in person at a headspace centre located near you or via our online support service at eheadspace.

Visit:

headspace.org.au/headspace-centres/
headspace.org.au/eheadspace/.

headspace
National Youth Mental Health Foundation