

## **POLICIES**

### **POLICIES for Treatment of Mental Disorders**

#### **[5] Early Treatment**

- a) Universal Health, Welfare and Education agencies in the community. [Tier 1]
- b) Private practitioners and Community Mental Health services [Tier 2]
- c) Specialist Mental Health Services [Tier 3]

#### **[5 c ] Specialist Mental Health Services,**

MHYFVic advocates that Specialist Mental Health Services for children and youth should be staffed at 120 Effective Full Time (EFT)/ 100,000 of the population in their age stratum, matching the level provided for adult services.

MHYFVic advocates that no more than 50% of this staffing be allocated to hospital-based services.

MHYFVic advocates that at least 50% of this staffing be allocated to community-based services and that half of this be utilised in Tier Two Community Health Centres for Intake/ Short-term assessment and treatment programs.

MHYFVic advocates that the other half of this staffing allocation be utilised for outreach consultation and CATT team service.

MHYFVic advocates that this community-based staff deployment and expenditure should be undertaken collaboratively with partnering service agencies (not just decided within its own silo).

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