

Resource three

eLearning and presentation resources

Resources to incorporate into local training



Australian Mental Health Care Classification

Mental Health Phase of Care

eLearning and presentation resources

How to use these resources

This pack consists of six eLearning resources including:

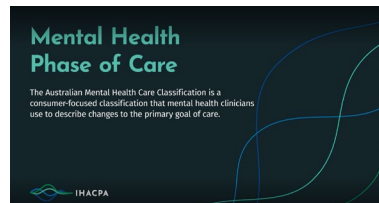
- Mental Health Phase of Care (MHPoC) Overview Video
- MHPoC Application Video
- Text screens for Overview
- Text screens for Application to Practice
- Multiple Choice Questions and Answers for Overview
- Multiple Choice Questions and Answers for Application to Practice.

These resources are designed to integrate into local online training packages or be used as part of education activities. These resources may be integrated into training initiatives (e.g.: Orientation training or mental health outcomes training).

The resources can be used individually or together in an eLearning package, embedded on a webpage or in face-to-face presentations.

Videos

May be embedded in a training package, website or used for presentations.



Multiple Choice Question and Answers

May be used individually or together in an eLearning SCORM* package, or embedded on a webpage, or used in face to face presentations.

*SCORM is a technical standard for eLearning formats.

Text Screens

May be used online or in presentation files.

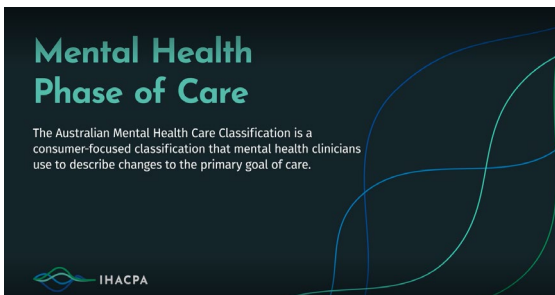
Video overview

MHPoC Overview Video

A short introduction video to MHPoC. The audience is not just clinicians but also consumers, families, carers and peer workers. This is for many reasons including transparency and empowerment and to facilitate productive clinical discussions.

Duration: Five minutes

Intended audience: clinicians, consumers, families, carers and peer workers



Video code and links

Embed code

```
<iframe width="560" height="315"
src="https://www.youtube.com/embed/hh0KOC5IkRw"
title="YouTube video player" frameborder="0"
allow="accelerometer; autoplay; clipboard-write; encrypted-
media; gyroscope; picture-in-picture"
allowfullscreen></iframe>
```

Link

<https://youtu.be/hh0KOC5IkRw>

Transcript link

<https://youtu.be/hh0KOC5IkRw>

Application to practice video

The MHPoC application to practice video

This video focuses on applying MHPoC to clinical practice. Once again, the audience is not just clinicians but also consumers, families, carers and peer workers for many reasons including transparency and empowerment and to facilitate productive clinical discussions.

The intention of this piece is to demonstrate the clinical utility of MHPoC and to show a number of ways it can be incorporated into everyday clinical practice.

Duration: Six minutes

Intended audience: clinicians, consumers, families, carers and peer workers.

Video code and links

Embed code

```
<iframe width="560" height="315"
src="https://www.youtube.com/embed/tOjTflpTI-M" title="YouTube
video player" frameborder="0" allow="accelerometer; autoplay;
clipboard-write; encrypted-media; gyroscope; picture-in-picture"
allowfullscreen></iframe>
```

Link

<https://youtu.be/tOjTflpTI-M>

Transcript link

<https://youtu.be/tOjTflpTI-M>



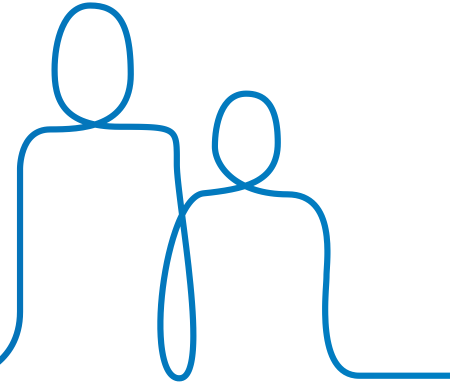
Text screens (overview)

The next three screens cover key messages about the Australian Mental Health Care Classification (AMHCC) and the MHPoC.

Classifying mental health care

The Independent Health and Aged Care Pricing Authority developed the AMHCC to:

- improve the clinical meaningfulness of classifications for mental health care,
- provide a nationally consistent framework for transparency,
- ensure funding based on mental health activity.



The Australian Mental Health Care Classification

The AMHCC is a consumer-focused classification providing accurate and consistent data about services provided to consumers, families, carers and peer workers across different health care settings.

It incorporates: setting, **MHPoC**, age group, complexity (Health of the Nation Outcome Scales (HoNOS), mental health legal status (MHLS) and Life Skills Profile (LSP-16)).

Mental Health Phase of Care

The MHPoC is a measure of the primary goal of care and therefore along with other variables is used to calculate future funding, manage resources and improve care services.

The MHPoC is assigned or reviewed...



At the admission or registration of a consumer



At transfer of care between settings by the receiving agency



When there is a substantial and sustained change to the consumer's clinical picture and family, carer or peer worker goals

MHPoC, HoNOS and LSP-16 should be reviewed on significant changes to consumer presentation

Mental Health Phase of Care

Acute

The primary goals of care are intended to reduce high levels of distress, manage complex symptoms, contain and reduce immediate risk.

Note: The Acute definition has been updated

Consolidating Gain

The primary goals of care is to maintain the level of functioning, or improving functioning during a period of recovery, minimise deterioration or prevent relapse where the consumer has stabilised and functions relatively independently. May also be known as maintenance.



Functional Gain

The primary goals of care is to improve personal, social or occupational functioning or promote psychosocial adaptation in a consumer with impairment arising from a psychiatric disorder.

Intensive Extended

The primary goal is prevention or minimisation of further deterioration, and reduction of risk of harm in a consumer who has a stable pattern of severe symptoms, frequent relapses or severe inability to function independently and is judged to require care over an indefinite period.

Assessment Only is no longer a MHPoC it is now a data item.

Therefore, assessment only does not constitute a mental health admission or activation. It is used when the review outcome does not lead to the consumer being placed in one of the other four phases immediately after. Therefore, assessment only does not constitute a mental health admission or activation.

The persons used in this image are stock photography models and used for illustrative purposes only.

Principles

Here are some guiding principles for using the MHPoC:

Discuss MHPoC during regular reviews of consumer's care plan.



The MHPoC does not need to be changed if the consumer's primary goal of care remains the same.

There is no limit on the number of MHPoC over an episode of care.

1

A consumer will only have one MHPoC at any time.

Discuss and agree on MHPoC when the consumer's care is co-managed or provided by multiple services.



A consumer's MHPoC can not be changed while they are on leave from a health care service.

MHPoC for quality care

Other benefits of using the MHPoC

For consumers, families, carers and peer workers

Consider in the context of **consumer, family, carer and peer worker goals.**

Facilitate **discussions** about the care journey.

Catalyst for **flexible** clinical intervention.

Provide **clarity** on consumer's current care plan and future journey.

For clinicians and managers

Focus on the primary goal of care.

Supports problem solving and **reflection.**

Encourages high value clinical **conversations.**

Used in conjunction with other AMHCC data to calculate future funding, manage resources and **improve local services.**



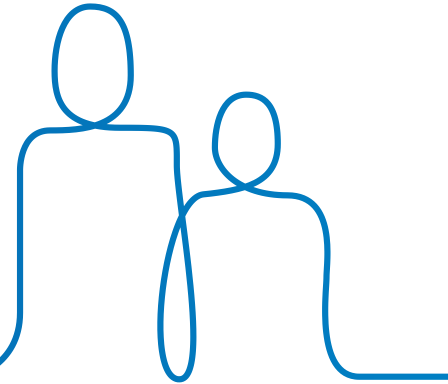
Text screens (application to practice)

The next three screens cover key messages about the AMHCC and the MHPoC.

Classifying mental health care

The Independent Health and Aged Care Pricing Authority developed the AMHCC to:

- improve the clinical meaningfulness of classifications for mental health care,
- provide a nationally consistent framework for transparency,
- ensure funding based on mental health activity.



The Australian Mental Health Care Classification

The Independent Health and Aged Care Pricing Authority (IHACPA) developed the AMHCC to ensure funding based on mental health activity.

The MHPoC is part of the AMHCC classification. There are four MHPoC:

- Acute
- Functional Gain
- Consolidating Gain
- Intensive Extended
- and one data item (Assessment Only).

Talk about the Mental Health Phase of Care

MHPoC is linked to the clinical decision making and reflection clinicians do everyday.

Discuss regularly with your clinical colleagues to build understanding of MHPoC and apply it consistently in your setting.

Incorporating MHPoC into the conversations, review and care planning that is shared with families, carers, clinical colleagues and peer workers will:

- support quality care,
- allow for more flexible clinical intervention and service provision,
- support high value clinical discussions and,
- support the future provision of resourcing for services.

Reflection activity

Watch the application to practice video individually or with a colleague

Think about one consumer (and their family, carers or peer worker) in your setting.

- If a family member asked you to explain what the consumer's current MHPoC means, what would you say?
- How do you think the consumer is feeling about their care goals? What have you observed?
- Does this consumer's current treatment match their current MHPoC?



Multiple choice question overview

Overview question one

A consumer's MHPoC should only be assigned or reviewed at admission or registration and when a transfer between settings occurs.

True

False

Feedback: This statement is False. A consumer's MHPoC should be assigned or reviewed at admission or registration, when a transfer between settings occurs, and when there is a substantial and sustained change to the clinical and consumer, family, carer or peer worker goals or significant change to the consumer's presentation.

Overview question two

The MHPoC is best described as...

(select the best answer)

- An indicator of the consumer's primary goal of care.
- A description of mental health care based on the service.
- A classification related to service funding.

Feedback: MHPoC is best described as an indicator of the consumer's primary goal of care.

Overview question three

The Acute MHPoC aims to reduce symptoms and distress and only applies to admitted services.

True

False

Feedback: This statement is False. Although the Acute MHPoC is often associated with admitted services, it can apply to consumers in community settings where the aim is to provide services to reduce or manage symptoms and distress.

Overview question four

How many MHPoC are there?

(select the best answer)

4

5

7

Feedback: There are **4 MHPoC**: Acute, Functional Gain, Consolidating Gain and Intensive Extended. Assessment Only is a data item, not a MHPoC.

Multiple choice questions application to practice



Application question one

You review a care plan with the consumer and a family member as they will be transferring to a new service. The primary goal of care is likely to remain unchanged.

What do you do? (select the best answer)

- Change the MHPoC to match the service provider.
- Organise a meeting with the family, carer or peer worker and representative of the new service to discuss the MHPoC and care plan.
- Transfer the consumer with the current MHPoC.

Feedback: MHPoC is not related to service. It reflects the primary goal of care. When transferring a consumer, review the MHPoC and care plan with the consumer, family, carer and peer worker with a representative at the new service.

Application question two

The best way to build an understanding of the different Mental Health Phases of Care (MHPoC) is to discuss with your colleagues the approach to individual consumer's care in your setting.

True

False

Feedback: This statement is True. Becoming fluent and using the MHPoC consistently is not just about learning the definitions, it is about working with consumers, families, carers, peer workers and colleagues to discuss what is appropriate for the consumer, setting and circumstances.