### EMPHN Mental Health & Alcohol and Other Drug Atlas

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| --- | --- | --- | --- |
| **Organisation** |  | **Person Completing this Form** |  |
| **Location** |  | **Contact Number:** |  |
| **Date** |  | **Email:** |  |

### Draft Report for Comment - Feedback Form

***Background***

*The Eastern Melbourne PHN (EMPHN) Integrated Mental Health and AOD Service Atlas (East & North East Melbourne) is the region’s first inventory of available services specifically targeted for people with a lived experience of mental illness and those with AOD related issues. The Atlas uses a standard classification system, the Description and Evaluation of Services and Directories in Europe for Long-Term Care (DESDE-LTC), to classify the service data from across the region and represents a snapshot in time creating a benchmark for future service planning evaluations. The application of this international evidence-based classification tool, and supporting methodology, enables fair comparisons with other regions both within Australia and internationally, providing a sound basis for long-term service planning, advancing efforts towards integrated care and improved outcomes for services users.*

*Data collection for this Atlas took place between September and December of 2017 and includes information from 21 eligible non-government organisations (NGOs) as well as services provided by the public health sector.*

*A total of 190 service delivery teams were identified across the EMPHN catchment, providing 215 main types of care, the majority of which are provided by the NGO sector (59.5%).*

*This Draft version for comment has been released by EMPHN and ConNetica to enable service providers in the region to review the data, particularly that which relates to the services they provide. Services included in this Atlas are those which are physically located within the boundaries of EMPHN or provide a significant proportion of their services to the population within the EMPHN region. These are described from page 47-87 of the Draft Atlas report.*

*Details on the methodology are provided from Page 4. The criteria for including a service are set out on page 13.*

*Some services are not included in this Draft version because the service does not meet the criteria, or organisations or specific service units were unable to be contacted during the data collection period to gather information in relation to the services provided. A list of organisations where insufficient information was available or provided is shown in Appendix A.*

*Providing the Draft version of the Atlas for comment enables organisations or specific service units to provide additional data or comment on the data shown.*

**General Comments on the Draft Version:**

**Specific Organisational Information**

*[Please provide details about the organisation including type and sources of funding, partnerships/relationships with other key organisations etc. where you believe these are incomplete or incorrect in the Draft Atlas ]*

**Specific Team or Service Information**

**Team 1**: *[Name]*

**Location:** *[Physical location, requires an EXACT street address, including postcode for mapping]*

**Main Type of Care** [*NB: this maybe multiple for the same team copy as required]*

Residential Outpatient Day Accessibility Information Self-help

**Target Group:** *[Age range and specific groups e.g. Indigenous, CALD, gender]*

Do more than 20% of the clients’ seen by this service have a mental health or AOD problem?

**Diagnosis Groups:** *[General or specific groups covered]*

**Description of Care:** *[Details of the care ensuring point related to intensity, acuity, accessibility etc.]*

**Beds:** *[ONLY for Residential services]*

**Catchment:** *[i.e. service area]*

**Funding Source:** *[include questions on payment of services]*

**Opening Hours:** *[i.e. Business Hours, extended hours etc.]*

**Staff:** *[details of all professional staff associated with the team]*

* *XX FTE Total* ***[ONLY professional staff does not include administration and management]***
* *[insert types of professionals along with their associated FTE]*

***Please note it will may be necessary for ConNetica to undertake an interview if new services are identified.***

|  |  |
| --- | --- |
| **Code** | *[For ConNetica;’s use only]* |

**Team 2**: *[Name]*

**Location:** *[Physical location, requires an EXACT street address, including postcode for mapping]*

**Main Type of Care** [*NB: this maybe multiple for the same team copy as required]*

Residential Outpatient Day Accessibility Information Self-help

**Target Group:** *[Age range and specific groups e.g. Indigenous, CALD, gender]*

Do more than 20% of the clients’ seen by this service have a mental health or AOD problem?

**Diagnosis Groups:** *[General or specific groups covered]*

**Description of Care:** *[Details of the care ensuring point related to intensity, acuity, accessibility etc.]*

**Beds:** *[ONLY for Residential services]*

**Catchment:** *[i.e. service area]*

**Funding Source:** *[include payment of services]*

**Opening Hours:** *[i.e. Business Hours, extended hours etc.]*

**Staff:** *[details of all professional staff associated with the team]*

* *XX FTE Total* ***[ONLY professional staff does not include administration and management]***
* *[insert types of professionals along with their associated FTE]*

***Please note it will may be necessary for ConNetica to undertake an interview if new services are identified.***

|  |  |
| --- | --- |
| **Code** | *[For ConNetica;’s use only]* |

*[insert next team as above]*

***Please forward your completed form to*** [***info@connetica.com.au***](mailto:info@connetica.com.au)

***If you wish to talk to one of the Atlas Project please call John Mendoza on 0415 715900 during office hours.***