

Mental Health Nurse Incentive Program (MHNIP)

General information

The Mental Health Nurse Incentive Program (MHNIP) funds community based general practices, private psychiatric practices and other appropriate organisations so they can engage Credentialed Mental Health Nurses to assist in providing coordinated clinical care for people with moderate and severe mental disorders.

From July 1, 2016 the funding for the Mental Health Nurse Incentive program (MHNIP) will be processed through Eastern Melbourne Primary Health Network (EMPHN) but the services will remain the same. The following set of information is provided based on frequently asked questions (FAQ).

FAQ about MHNIP

Q: What services do Mental Health Nurses under MHNIP provide?

A: Mental Health Nurses provide holistic, culturally sensitive and coordinated clinical care for people with severe mental disorders working closely with psychiatrists and general practitioners. The Mental Health Nurses can provide the following:

- Care tailored to individuals according to best practice and recovery models
- Establish a therapeutic relationship with the patient as part of delivering support and counselling
- Liaise closely with family and carers as appropriate
- Regular review of the patient's mental state
- Administer, monitor and ensure compliance by patients with their medication;
- Provide information, education and resources to patients including about physical health
- Maintain links and undertake case conferencing with GPs, psychiatrists and allied health workers such as psychologists (health professionals may be eligible to claim case conferencing items under the MBS)

- Coordinate services for the patient in relation to GPs, psychiatrists and allied health workers, including arranging access to interventions from other health professionals as required
- Contribute to the planning and care management of the patient
- Liaise with organisations that provide services under other programs, such as Partners in Recovery and Personal Helpers and Mentors Service, as appropriate and where available
- Support for patients to attain a sense of well-being and connectedness to the local community

Q: Who is eligible for MHNIP?

A: General practitioners (GPs) and psychiatrists will determine which individuals are eligible for services under the MHNIP.

To be eligible, patients must:

- Have a diagnosable mental illness that significantly affects daily living
- Be at risk of hospitalisation or relapse of serious mental illness
- Have a current mental health treatment plan
- Not be currently managed by public mental health services.

Q: What is a mental health treatment plan?

A: Together with the mental health nurse, a GP Mental Health Treatment Plan must be developed by GPs or an equivalent plan must be developed by psychiatrists. These plans must include specific reference to the roles and responsibilities of both the Mental Health Nurse and the treating GP.

Treatment must be provided according to the plan and the relevant clinical guidelines for the treatment of that disorder. A GP or psychiatrist must regularly review the plan together with the mental health nurse. The review should include, where appropriate, input from a clinical psychologist, registered psychologist or other allied health professional.

Q: What does it mean to be a Credentialed Mental Health Nurse?

A: The Mental Health Nurse Credential recognises the qualifications, skills, expertise and experience of nurses who are practicing as specialist mental health nurses. It demonstrates to employers, professional colleagues, consumers and carers that an individual nurse has achieved the professional standard for practice in mental health nursing.

Q: How do MHNIP patients exit from the program?

An individual is no longer eligible for services under the MHNIP when:

- their mental disorder no longer causes significant disablement to their social, personal and occupational functioning
- they no longer need the clinical services of a mental health nurse, or
- the GP or psychiatrist employed to treat the individual by the organisation participating in the MHNIP is no longer the main person responsible for the patient's clinical mental health care.