



Referring to Adult HITH

All referrals to Adult Hospital in the Home (HiTH) will be reviewed and prioritised between 8.30am and 5pm daily by the HiTH Intake Officer or CNS (weekends).

All referrals should be discussed with the Intake Officer or CNS before they will be considered for HiTH. Please phone **6383 1120** to speak to them. If you will not be available to discuss the referral, please provide contact details of someone who can liaise with the HiTH service about the referral.

Referrals must be completed on the Adult HiTH referral form. This is available as a PDF printable form for hand written referrals or an expandable word document for typed referrals.

Please send referrals to <u>MHPHDSAdultHITH@health.wa.gov.au</u>. Faxed copies will also be accepted. The HITH inbox will not be monitored outside of the hours of 8.30am-5pm.

Referral paperwork must contain sufficient information for the HITH service to determine suitability of the patient for HiTH against the below admission criteria. Please send any relevant supporting documentation which is *not* available on PSOLIS with the referral form.

Admission Criteria

Criteria for Admitted Care: Patient must qualify for a voluntary inpatient acute bed.

The primary clinical purpose or treatment goal is improvement in the symptoms and/or psychosocial, environmental and physical functioning related to a patient's mental disorder.

The patient must meet at least one of the following qualifications:

- the patient requires expert clinical management and facilities that are only available in an inpatient ward or HITH
- the patient requires at least daily assessment of their medication needs
 - there is a legal requirement or social circumstances necessitating admission such as:
 - o adult at risk (for example, inadequate level of social support to safely leave the hospital)
 - \circ the patient requires daily observation, risk assessment and plan to minimise self-harm risk

Adult HITH Requirements

Resides in NMHS catchment area

Home environment suitable for mental health care to be provided in the home

Accommodation stable for next 14 days

Person is suitable for a voluntary admission (will accept people on a CTO)

Aged 18-64 OR an older adult who is an active consumer of a community mental health service without cognitive deterioration

Clinical Needs

Person has diagnosed mental health condition or acute mental health symptoms and is experiencing an acute episode of mental health symptoms/ deterioration;

- severity of symptoms has worsened and warrant admitted care setting OR
- Person requires intensity of support not available in a community setting.

Patient would benefit from daily HITH visits

Physical health needs are stable or managed in the community

AOD use is at a level that it will not impact or inhibit clinical care to a point that HITH would not be beneficial to the patient

Risk

Risk of violence, aggression or self-harm can be managed in a community setting

Home environment is safe for community visiting during daytime and evenings

Consent and Participation

Patient consents to participate with HITH treatment on a daily basis and likely to engage with daily visits



NORTH METROPOLITAN HEALTH SERVICE, MENTAL HEALTH, PUBLIC HEALTH AND DENTAL SERVICES

Adult Community Mental Health Catchment Area

JOONDALUP CATCHMENT AREA JOONDALUP CMH		STIRLING CATCHMENT AREA		LOWER WEST CATCHMENT AREA
		OSBORNE CMH	MIRRABOOKA CMH	SUBIACO CMH
Alkimos	Kingsley	Balcatta	Alexander Heights	City Beach
Ashby	Kinross	Carine	Balga	Claremont
Banksia Grove	Mariginiup	Churchlands	Ballajura	Coolbinia
Beldon	Marmion	Doubleview	Cullacabardee	Cottesloe
Burns Beach	Merriwa	Glendalough	Darch	Crawley
Butler	Mindarie	Gwelup	Dianella	Daglish
Carabooda	Mullaloo	Hamersley	Girrawheen	Dalkeith
Carramar	Neerabup	Herdsman	Koondoola	Floreat
Clarkson	Nowergup	Innaloo	Landsdale	Jolimont
Connolly	Ocean Reef	Joondanna	Lexia	Karrakatta
Craigie	Padbury	Karrinyup	Madeley	Kings Park
Currambine	Pearsall	North Beach	Malaga	Leederville
Duncraig	Pinjar	Osborne Park	Marangaroo	Menora
Edgewater	Quinns Rock	Scarborough	Mirrabooka	Mosman Park
Eglinton	Ridgewood	Stirling	Nollamara	Mt Claremont
Gnangara	Sinagra	Trigg	Noranda	Mt Hawthorn
Greenwood	Sorrento	Tuart Hill	Westminster	Nedlands
Heathridge	Tamala Park	Waterman's Bay	Yokine	North Perth
Hillarys	Tapping	Wembley Downs		Peppermint Grove
Hocking	Two Rocks	Woodlands		Shenton Park
lluka	Wangara			Subiaco
Jandabup	Wanneroo			Swanbourne
Jindalee	Warwick			Wembley
Joondalup	Woodvale			West Leederville
Kallaroo	Yanchep			
Joondalup Catchment		Stirling Catchment		Lower West Catchment
Regents Park Rd	Postal Address:	Unit 1/20 Chesterfield Rd		2 Nicholson Road
Joondalup WA 6027	PO Box 382 JOONDALUP WA 6919	Mirrabooka WA 6061		Subiaco WA 6009
Ph: (08) 9400 9599		Ph: (08) 9344 5400		Ph: (08) 9489 7200
Fax: (08) 9400 9590		Fax: (08) 9345 2631		Fax (08) 9382 4171

Adult Hospital in the Home