

CHALLENGES

Operational difficulties

Outreach and home visits, while valuable, contribute to significant travel time, with clinicians sometimes spending up to three hours commuting each way due to the vast geographical spread. Limited access to vehicles further complicates service delivery, with only one vehicle shared among three to four staff members.

Staffing challenges

Staffing the central Hub has been difficult due to the demands of outreach, though this issue is expected to improve with upcoming staffing increases. The team has worked hard to integrate clinical governance and risk mitigation strategies however this requires ongoing review/development to enhance service efficiency and safety.

Limited medication management and psychiatry

The service facilitates medication reviews with GPs, and the consultant psychiatrist who can provide diagnostic clarity, assessment and treatment planning. However, YES does not coordinate ongoing medication management, which can be a barrier for some young people requiring more comprehensive pharmacological oversight. Psychiatry support is limited to 7 hours per week and available only via telehealth, restricting direct client access.

SUCCESSES

Comprehensive and flexible

The service operates Monday to Friday, 10am-6pm. It offers telehealth and text-based counselling, as well as community outreach, ensuring accessibility for individuals who may struggle to attend in-person appointments. The ability to engage with clinicians across various settings, such as schools, headspace, and other youth services, enhances continuity of care. When necessary, clinicians also conduct home visits, demonstrating a strong commitment to meeting young people where they feel most comfortable.

Stepped care model

The service is built upon a stepped care model, providing structured referral pathways between headspace, YES and CAMHS. The team’s commitment to solution-focused, action-oriented discussions in Stepped care coordination meetings helps ensure seamless consumer journeys and trauma-informed handovers between services.

Multidisciplinary team

With a multidisciplinary team that includes mental health clinicians, peer workers, child clinicians, and family therapists, the service delivers evidence-based interventions such as DBT, CBT, family-based therapy, and psychoeducation. A consultant psychiatrist supports the team, offering diagnostic clarity and treatment planning, while strong collaboration with general practitioners ensures ongoing care.

ANGELIQUE'S STORY

My name is Angelique. I’m 18 years old, and I joined the YES NSW North Coast program in 2024 after immigrating to Australia in mid-2023. I thought leaving my abusive home behind and starting fresh would free me from my past – but the pain came with me. In a moment of vulnerability, I opened up to my school counsellor, who referred me to the YES program. Despite excelling in sport and school, I was silently battling depression, anxiety, and suicidal thoughts. Moving to a new country had left me feeling isolated and overwhelmed. YES became my lifeline. Through the program, I received free, non-judgmental support that helped me keep going, even on the hardest days. I gained the strength to move out at 18, aiming for independence and financial freedom.

But not long after, my health collapsed; I crashed my car after fainting because of heart issues, my heart literally stopped, and I ended up in hospital. Doctors dismissed my symptoms as anxiety, depression and that it was “all in my head.” It was devastating. With the help of my mental health team, and GP, we concluded that it was a mix of multiple things. Thankfully, my counsellor didn’t give up on me. My counsellor stood by me as I searched for a doctor who listened and cared. After finding him, she communicated directly with him as my advocate. I kept showing up to appointments, to counselling – and over time, I was diagnosed with multiple chronic and acute conditions that had long been ignored. YES NSW North Coast helped me rebuild. I’ve gained not only confidence and clarity, but also a deep understanding of mental health that now supports me in my own work with others. While I’ve now transitioned to a young adult support program, YES was the first place where I felt truly seen. To anyone struggling: say ‘yes’ to YES NSW North Coast. Their support is real, accessible, and ongoing – and it changed my life.

YOUTH ENHANCED SERVICE CASE STUDY

EACH

Healthy North Coast PHN region (from Port Macquarie to Tweed Heads)

INTRODUCTION

The Youth Enhanced Service (YES) provides mental health supports for young people and their families aged 8-18 who experience complex and severe mental health issues. It operates out of 3 hub locations across the north coast of New South Wales (NSW), including Port Macquarie, Coffs Harbour and Byron Bay. The team consists of a multi-disciplinary team (MDT) of peer workers and mental health staff who work in a client-centred, family-inclusive and trauma-informed manner to reduce experiences of mental ill-health. The length of care is reviewed between the young person, their key supports and their treating clinician and is measured by treatment goals and the reduction in symptoms of severe mental health problems.

GET IN TOUCH

IF YOU'D LIKE MORE INFORMATION ABOUT ORYGEN, PLEASE CALL +61 3 9966 9100 OR SEND AN EMAIL TO INFO@ORYGEN.ORG.AU

ORYGEN.ORG.AU

ORYGEN LTD

35 POPLAR ROAD PARKVILLE VIC 3052 AUSTRALIA

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Orygen acknowledges the Traditional Owners of the lands we are on and pays respect to their Elders past and present. Orygen recognises and respects their cultural heritage, beliefs and relationships to Country, which continue to be important to the First Nations people living today.

REVOLUTION IN MIND

orygen

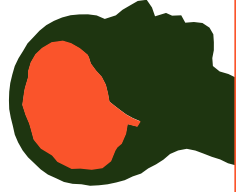
YOUTH ENHANCED SERVICE (YES) EACH

ELIGIBILITY CRITERIA

- Aged 8-18
- Meets the Assessment and Referral Decision Support Tool (IAR-DST) threshold of complex and severe mental health concerns
- Living in the Healthy North Coast region

KEY PRESENTING ISSUES

- Complex trauma, developmental abuse, attachment disruption, sexual assault, eating disorders, substance use, intense mood dysregulation and emerging personality disorders.
- Psychological and interpersonal impairment due to neurodiversity.
- Psychosocial issues such as homelessness, complex family dynamics, unemployment, family violence, discrimination and social isolation. A young person's experience of complex and enduring psychosocial difficulties may have direct impact to their experiences of mental distress, requiring higher intensity intervention from YES or similar services that can provide dynamic engagement in community settings.
- Deliberate self-harm and suicidal ideation or behaviours.



YOUNG PERSON MEETS ELIGIBILITY FOR SERVICE

MEDICARE MENTAL HEALTH LINE - HEALTHY NORTH COAST REFERRAL SPOKE. COMMON REFERRERS INCLUDE:

- Other health care providers, like GPs, paediatricians or allied health workers.
- Community stakeholders, including headspace or other youth services.
- Self-referrals by young people and families.

ENHANCED ACCESS

- 10am-6pm Monday to Friday
- Outreach sessions at home or in the community as required
- Flexibility with frequency and duration of appointments



PSYCHOLOGICAL INTERVENTIONS

Psychological interventions such as Dialectical Behaviour Therapy (DBT), Cognitive Behaviour Therapy (CBT), family-based therapy, Acceptance and Commitment Therapy (ACT), and psychoeducation.

CASE MANAGEMENT

YES can provide some care coordination, however if there are significant psychosocial needs, YES can facilitate referrals to other agencies offering case management support.

ACCESS TO MEDICAL CARE

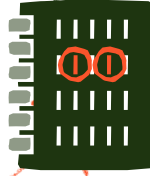
- Access to a consultant psychiatrist limited to 7.5 hours per week for the team.
- Direct psychiatry sessions available on a needs assessed basis, very limited availability (7 hours per week) and available only as telehealth. Purpose is for diagnostic clarification and treatment recommendations.

STAFFING PROFILE

- 1 FTE clinical lead
- 1 FTE team leader
- 1 FTE family clinician
- 1.6 FTE children's clinician
- 1.4 FTE family and carer peer worker
- 0.8 FTE identified First Nations peer worker
- 1.6 FTE youth peer worker
- 4.8 FTE youth mental health clinician
- 0.2 FTE psychiatry

CASELOADS

16-20 per FTE



DURATION OF CARE

Up to 12-18-month duration of care; average fortnightly sessions based on the needs of the YP with case reviews every 12 weeks.

PARTNERSHIPS AND INTEGRATION

We have strong partnerships with NGO and LHD youth services throughout the region. This allows for seamless transitions in care and trauma-informed practice. If a client requires higher intensity support due to worsening mental health, we will refer to the below LHD services:

- Child adolescent mental health services (CAMHS).
- Safeguards
- Sexual Assault Services.
- In cases where a client has shown improvement, we can step down in care to the following NGO-led services for young people; below are the services available for step down support
- headspace.
- Psychosocial service
- Reconnect.



WHAT ARE THE REFERRAL PATHWAYS OUT OF THE PROGRAM?

- Stepped Care meetings provide the ability to "step up/down" into CAMHS or headspace.
- Other clinical services (e.g. private providers).
- YP could come through the Medicare referral pathway again for another episode of care, unless they are coming from a Stepped Care meeting and the referral was being made by NSW Department of Health, headspace or Mission Australia.
- Non-clinical services e.g. housing, employment, community engagement

PROGRESS MONITORING

- HEADS/biopsychosocial assessment completed with a young person if one has not been done in the past 6-12 months with Medicare Mental Health line/headspace/CAMHS.
- Case review template completed for MDT following assessment phase.
- K10 or other suitable outcome monitoring tools
- Three-monthly reviews with YP and multidisciplinary team meeting



GOALS

Client and clinician complete a 'my care plan' form to direct treatment goals, identifying key presenting issues, relevant action and people who can assist in progress towards these such as:

- Attending school more days per week
- Gaining more meaningful social connections
- Reducing/ceasing unhelpful coping strategies e.g., self-harm and/or substance use
- Measurable reduction in psychological distress
- Clinicians may develop SMART goals, breaking down concerns or barriers in a young person's life.



DISCHARGE

