













Getting Started with Digital Mental Health (for Professionals)

WHO IS THIS FACTSHEET FOR?

This factsheet is for any Health Practitioner new to using digital mental health resources with their clients or patients. 'Health Practitioners' can include GPs and other Medical Specialists, Psychologists, Counsellors, Social Workers, OTs, Physiotherapists, Nurses, Pharmacists, Guidance Officers, Peer Support Workers and anyone else who might be assisting people with mental health concerns.

BENEFITS OF DIGITAL MENTAL HEALTH (dMH) RESOURCES

Digital mental health resources include any digitally-delivered mental health tools, such as:

- Apps
- Online programs
- · Telephone services
- Information sites
- Online forums

Benefits include

- Access at any time and from any place
- · Low stigma, can be anonymous
- · Empowering
- · Low or no cost
- Evidence-based
- Can be used alone or alongside treatment from a health professional
- Can increase impact of other services

STEP 1: Consider how you will use dMH within your role and working environment

Your use of dMH resources will depend on your specific role and working environment. How much contact do you have with clients - is it only brief, 15-minute chats? Or do you see them for longer? How much of that time would you chat about their mental health? How much time do you have to follow up with them and coach them through different tools - do you see them regularly, e.g. every week, or only once every couple of months? Consider the following three role types and think about which one your role might closely align with. You might even switch between roles, depending on the client and context.

1. Recommendation

This role involves providing brief information about dMH resources to clients in either an informal (e.g. in passing) or formal (e.g. during a consultation) setting. For example, during a physical health consult, a clinician might mention an online program to a client and write down the name of it or quickly show them the website. This role may suit clinicians who have brief or irregular contact with clients, or where mental health issues are not the main focus of contacts.

2. Coaching

Any clinician working in a more focused clinical role (e.g. assessing clients for mental health issues, providing support or referrals, and having some ongoing contact) can take on a coaching role with dMH. Coaching can involve referring the client to a dMH resource, which the client then works through themselves, or providing ongoing support to help the user engage with and complete the resource. With ongoing contact, the clinician can also monitor the client for any worsening symptoms and refer them for more intensive engagement with a mental health professional if necessary.

3. Integration into focused treatment

This role will suit therapists or clinicians already providing symptom-focused or comprehensive therapy to clients and seeing them on a regular, ongoing basis. In this role, dMH resources serve to enhance and extend the work on the clinician, and are used as park of a comprehensive intervention. Using dMH resources in this way can be particularly helpful where multiple therapeutic approaches are required to tackle one presenting problem, or where there are secondary disorders requiring treatment.





























There are thousands of mental health websites, programs, apps and other digital services out there. It can be difficult and overwhelming to know where to start.

Fortunately, there are some trusted sources that collate and regularly update all available digital mental services from trusted Australian service providers, and these are a great place to start.

Head to Health

Developed by the Australian Government, Head to Health is a new digital mental health gateway to help all Australian search for and access evidence-based, free or low-cost, digital mental health services. The site allows you to narrow your search to filter results appropriate to your preferences, including age, population group and mental health concern. It also contains a section specifically for Heath Professionals, which provides further information on the benefits of dMH resources and how to get started using them.

eMHPrac Website

The eMHPrac website contains a range of resources to help practitioners navigate the world of digital mental health services. These include:

Resource Library

The Resource Library contains a range of free materials to guide practitioners in choosing appropriate services for their clients, including our popular 'Guide to Digital Mental Health Resources'.

A Digital Mental Health Directory

The searchable Directory provides a useful overview of the range of Australian digital mental health services.

Research Evidence

This section provides links to a range of articles on the effectiveness of dMH resources.

STEP 3: Choose one or two dMH resources to explore in detail

Once you have a good overview of the range of dMH resources and services available, choose one or two resources to explore in fine detail. Don't pressure yourself to learn about all the services at once - there are far too many and you will become easily overwhelmed. The more knowledgeable you are about each resource, the more you'll be able to encourage and coach clients in using them - the more invested you are, the more invested they will be! So be patient, take it slowly, and really get to know each resource inside and out before moving on to another one.

When exploring a resource in detail, do everything a client would do - register for an account (some services have special health practitioner accounts available, so you can try out all their resources for free); fill out the quizzes or assessment measures; complete a few lessons; try out the homework tasks.

Consider how you would feel using this program as a client, asking yourself the following questions:

- Is it user-friendly (especially for those with low tech literacy)?
- Is it well-designed do you like the look and feel of it?
- Is it clear and easy to understand?
- Is the information evidence-based?
- Does it match the therapeutic approaches you use (if relevant)?
- Are there any exclusion criteria for this resource (e.g. clients must be of a certain age)?
- · Is there anything that you don't like about it?

Remember, the more confidence you have in a resource, the more confidence your client will have and the more likely they will use it.



























STEP 4: Recommend a resource to your first client

Once you feel confident with a few resources, go ahead and recommend a resource to your first client. Like every clinical skill, this is another one that will take practice, so don't expect that it will go perfectly to start with. The client might bristle at the idea of dMH, they might agree to your suggestion but not end up using it (or forget to use it!), or they might try it and get stuck. These are all issues that you will learn to address and overcome in time, so be patient.

To boost your confidence, start as easily as you can with the following tips:

- Start off gently by just suggesting a resource (*Recommendation* role). You can work your way up to more advanced use (*Coaching* and *Integration* roles) once you're more familiar with the resources. Consider picking a client with a good tech literacy and who perhaps already has a good track record of following through on suggestions or homework tasks.
- Try recommending a resource that is easy for the client to engage with, e.g. a simple symptom focused app requiring only 5-10 minutes of attention at a time, rather than a comprehensive online program requiring an hour of time per week.
- If you have time, get the client to download or register for the resource in the session so you can show them what it looks like.

Ultimately, your goal is to create a positive first experience of dMH for your client (and yourself!) so that you feel encouraged and it increases your confidence in recommending more resources.

STEP 5: Follow up (if relevant)

After recommending the resource to your client, organise a time to follow up with them, if relevant and possible. Will it be at your next appointment (which might already be scheduled in)? Will it be a quick check-in via phone or email (if appropriate)? Ask how they found the resource, including what they liked and didn't like. They may have picked up on things that you didn't notice, and this information is all incredibly helpful for recommending resources to other clients in the future. For example, if a client reports that they felt annoyed by having to fill out a questionnaire every time they accessed the service, you might be able to problem-solve the issue with them (e.g. some services have a 'Skip' option or will only present the questionnaires if there are long gaps between logins). You can then provide this information ahead of time to future clients.

In addition to asking the client for their feedback, spend some time reflecting on and consolidating what they learned from it, and make a plan for their ongoing use of the resource.

Well done - you've made a great start to using digital mental health and are on your way to making it a regular part of your practice!

























QUICK GUIDE TO GETTING STARTED WITH dMH

Consider how you will use dMH within your role and working environment.

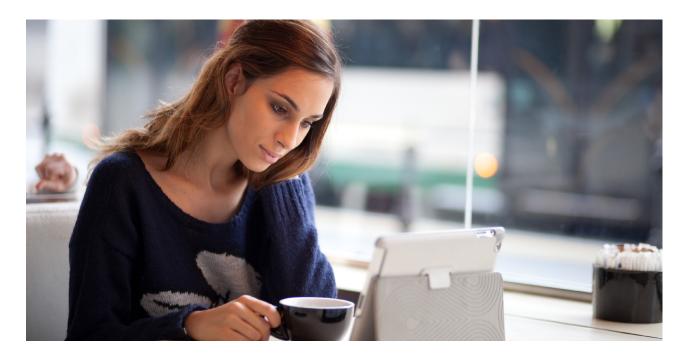
Role Types: Recommendations, Coaching, Integration into focused treatment

Familiarise yourself with an overview of dMH programs and resources.

Choose one or two dMH resources to explore in detail.

Recommend a resource to your first client.

Follow up (if relevant)



The e-Mental Health in Practice Project (eMHPrac) is funded by the Australian government, and only promotes Australian funded services and programs.











