



## The Nesting Place Therapy Services

# Referral Pathways & GP Collaboration

## Why This Matters

Collaboration between GPs and The Nesting Place ensures that clients receive consistent, well-coordinated care throughout their recovery journey. Whether the referral is through a **Mental Health Treatment Plan (MHTP)** or an **Eating Disorder Plan (EDP)**, clear communication and regular updates help maintain a shared understanding of progress, risks, and ongoing needs.

The aim is simple: to support clients with compassion, clarity, and evidence-based care — while ensuring their recovery is held within a trusted, multidisciplinary network.

## 1. Referral Pathways

### Mental Health Treatment Plan (MHTP)

An MHTP is a referral pathway for clients experiencing general mental health concerns such as anxiety, depression, trauma, or adjustment difficulties.

#### **Key points:**

- Clients are eligible for up to **10 rebated sessions per calendar year** under Medicare.
- The initial referral is for **6 sessions**, after which a **review with the GP** is required to access the remaining 4.
- Sessions focus on evidence-based psychological therapy, such as CBT, ACT, or narrative approaches for ATSI people.
- Suitable for clients without an active eating disorder diagnosis or where the eating difficulties are secondary.

### **When to consider an MHTP:**

- Generalised anxiety, mood disorders, grief, or adjustment issues.
- Trauma-focused or relational therapy needs.
- When disordered eating is mild or exploratory rather than the primary diagnosis.

### Eating Disorder Plan (EDP)

The EDP is a **specialised Medicare initiative** designed for individuals with a clinically diagnosed eating disorder or those meeting the criteria for “subthreshold” eating disorders.

### **Key points:**

- Allows up to **40 rebated psychological sessions** and **20 dietetic sessions**.
- Requires a **GP or psychiatrist referral**, supported by an eating disorder assessment (EDE-Q, EDA-5, or clinical formulation).
- The EDP is reviewed by the GP at every **10-session interval**, ensuring shared oversight and medical monitoring.
- Collaborative care is essential — particularly between GP, therapist, and dietitian — to track physical, nutritional, and psychological stability.

### **When to consider an EDP:**

- Diagnosed eating disorders (e.g. AN, BN, BED, OSFED).
- Disordered eating significantly impacting health, weight, or psychosocial functioning.
- Clients engaged with multidisciplinary supports or needing nutritional and medical review alongside therapy.

Feature	MHTP	EDP
<b>Focus</b>	General mental health	Eating disorder treatment
<b>Eligibility</b>	Any MH concern	Diagnosed/subthreshold ED
<b>Rebated sessions</b>	10 per year	40 psych + 20 dietetic
<b>Reviews</b>	After 6 sessions	Every 10 sessions
<b>Multidisciplinary care</b>	Optional	Strongly encouraged
<b>Monitoring</b>	Psychological focus	Includes medical + nutritional review

## 2. How The Nesting Place Collaborates

At The Nesting Place, collaboration is not an afterthought — it's a central part of care. We aim to provide clear, regular, and contextual updates that strengthen continuity and safety.

### Typical collaboration structure:

Stage	Action	Communication
<b>Referral received</b>	Review of referral, triage of suitability, client contact made	Confirmation email sent to GP (and referring provider if applicable)
<b>Initial sessions</b>	Assessment and formulation phase (2–3 sessions)	Summary or brief update provided to GP outlining initial focus and goals
<b>Midpoint review</b>	Session 6 (MHTP) or every 10 sessions (EDP)	Clinical progress update and plan for next phase shared with GP

Stage	Action	Communication
<b>Transition or discharge</b>	Review of outcomes, recommendations for ongoing supports	Written summary sent to GP; follow-up phone call if clinically indicated

### **Standard Updates Include:**

- Client engagement and attendance pattern
- Current clinical presentation and risk indicators
- Emerging treatment themes and focus areas
- Collaboration with other treating professionals (e.g. dietitian, psychiatrist, paediatrician)
- Summary of future therapeutic goals and recommendations

### **Preferred methods of communication:**

- Secure email (Galaxy or encrypted email link)
- Phone consultation for urgent or complex updates
- Shared care meetings (where applicable)

**Turnaround:** Updates are typically sent within **1–2 weeks** of review points unless otherwise requested.

## Shared Care Principles

Respect and transparency: Information shared with GPs and specialists is done collaboratively with client consent.

Regular monitoring: Medical, psychological, and nutritional domains are each reviewed at appropriate intervals.

Relational continuity: Clients benefit most when their care team communicates frequently and predictably.

Timely feedback: Significant clinical changes or concerns are communicated promptly.

The Nesting Place values collaborative care that is steady, relational, and clinically informed.

I welcome ongoing dialogue with GPs and allied professionals to ensure clients' recovery is supported from all sides — mind, body, and context.

Please do reach out to chat with me at a suitable time. I am flexible.

I can be reached on 0466 075 401 or alternatively,  
[kelvin.mui@thenestingplace.com.au](mailto:kelvin.mui@thenestingplace.com.au). My provider number is 6312272J.