



Mental health care for serving Australian Defence Force members

A short guide for hospitals and community services

Purpose

Thank you for providing care to our serving members. This guide is for emergency department, inpatient and community health professionals caring for serving Australian Defence Force (ADF) members presenting with suicidal distress or other mental health concerns. It outlines how to contact Defence health care, what on-base supports exist, and how to facilitate safe clinical handover and continuity of care.

Key points – at a glance

- **National 24/7 Defence** clinical liaison is available to facilitate handover if you are unable to contact a Defence health practitioner directly: **1800 IMSICK (1800 467 425)**.
- We want to work with you to support our serving members and ensure ongoing care.
- Defence health requests early contact, particularly for admissions and discharge planning.
- Discharge summaries are critical for safe clinical handover and remain medical-in-confidence within the Defence health care system.

How to contact Defence health care

Key contact (24/7): 1800 IMSICK (1800 467 425)

If you are admitting or discharging a serving ADF member from your Emergency Department (ED) or inpatient unit and do not have a direct contact for the local Defence health centre, please call **1800 IMSICK**. This is a national 24/7 line staffed by registered nurses.

Please contact Defence health care if you are:

- Wishing to discuss care with a Defence health practitioner.
- Discharging a serving member from ED or inpatient care after a presentation involving mental health concerns.
- Admitting or discharging a serving member following assessment or management under the mental health legislation of the state or territory.
- Admitting a serving member to hospital because of mental health or risk concerns (risk of suicide and harm to others).



1800 IMSICK can link you with the relevant Defence health centre, facilitate clinical handover, and escalate to a Defence medical officer if required.

Serving members admitted for mental health concerns or suicidality (suicide ideation, planning or attempt)

For serving members admitted to public or private mental health facilities, the serving member's local Defence health centre will usually make regular contact during admission to monitor progress and plan for transfer of care. We plan to review serving members discharged from external mental health facilities on the day of discharge where possible.

What we ask of you is to:

- Notify the Defence health centre of admission.
- Notify the Defence health centre of discharge plans.
- Provide a discharge summary, including risk formulation, any medications and follow-up recommendations.
- Document any mandatory notifications made (e.g. child protection or firearms-related notifications).
- Ensure all legislative requirements in relation to mandatory notifications in your state or territory are complied with in the same way as for any other community member. If mandatory notifications are indicated, complete these in accordance with your usual procedures and include this information on the discharge summary.

If a serving member has concerns about a Defence health centre being contacted, the information in this guide may assist with your discussion about consent to make contact.

On-base health care

Full-time serving members have access to comprehensive health care as a condition of their service. This includes both primary health care and referral for specialty outpatient or inpatient healthcare. Serving members access primary health care through on-base Defence health centres. These health centres provide both booked appointments and unscheduled care ("sick parade"). Health centre teams include medical officers, nurses and nurse practitioners, mental health professionals, physiotherapists, dentists, pharmacists and rehabilitation consultants.

Some health centres operate seven days a week, while others operate Monday to Friday, with weekend coverage provided regionally. Contact details for Defence health centres are provided [here](#)¹. Some locations have a small on-base ward: this is a low-acuity medical ward and is not a mental health facility. It is not suitable for members with complex mental health concerns or risks of suicide/harm to others, or members who require involuntary treatment.

Risk formulation and follow-up

Defence uses prevention-oriented risk formulation when considering risks of self-harm, suicide and harm to others. Your clinical assessment and management recommendations remain central and will be reviewed at the post-discharge appointment.

¹ <https://www.defence.gov.au/adf-members-families/family-programs-local-services/garrison-health-centres>

Defence does not operate a home-visiting mental health service. Where higher levels of community mental health support are required, serving members should be linked with state or territory community mental health services, as you would for other people.

Referrals for off-base care

In addition to on-base care, the Defence healthcare team can refer serving members to external mental health providers and medical specialists, including psychiatrists. Referrals may include private hospital day programs or private inpatient admissions, noting usual waiting periods apply. The treatment recommendations in your discharge summary can inform which services the member is referred to after discharge.

Return to duty and workplace considerations

Serving members can be referred to occupational rehabilitation consultants who are part of the Defence health centre team. Rehabilitation consultants are allied health professionals who work collaboratively with the member, Defence health care team and the workplace to develop a holistic and individualised rehabilitation program. This can include options such as a graded return to work, flexible hours or changes to work start/finish time, change of workspace, changes to break time, temporary reallocation of some duties, or temporary redeployment to a different role.

Defence-specific help lines

Serving members have access to several Defence-specific 24-hour health support telephone lines in addition to community crisis services. Details are provided at [Annex A](#) or at <https://www.defence.gov.au/adf-members-families/crisis-support/helplines>. Annex A outlines supports available to service category (SERCAT) 6 and 7 members (members of the permanent ADF), SERCAT 3-5 members (reserve members), in addition to supports available to families, ADF cadets and Defence public servants.

Defence health care – what’s different

Caring for serving members involves unique job, occupational and cultural considerations. Depending on their role, serving members may deploy at short notice to undertake high tempo work in an austere environment with limited health support, away from family and friends. Serving members maintain a high degree of physical fitness as part of their job.

Defence health care includes occupational considerations alongside clinical care. Serving members may be concerned about how an illness or injury affects their ability to deploy or perform aspects of their job. A period of non-deployment can facilitate a period of intensive therapy or other treatment, medication stabilisation, access to supports and/or rehabilitation. The serving member’s care needs, current fitness to deploy and any temporary workplace considerations will be reviewed by the Defence medical officer after discharge.

In Defence, command play an important role in member welfare, often maintaining contact during hospitalisation and supporting on discharge.

Military culture can influence presentation. Serving members may appear very stoic and find it difficult to discuss past experiences. They may be concerned about letting their team down, or be constrained in what they can share due to security obligations. There are some very helpful existing resources on military cultural awareness which can assist in better understanding the military context and facilitate your therapeutic engagement. These are:

[Professional development military awareness | Open Arms](#)²

[Veterans' Mental Health: Support & Best Practices | Medcast](#)³

Reserve service and veterans

Reserve (part-time) serving members access health care in the same way as other members of the general public unless they are undertaking a period of fulltime work in the ADF. Defence-specific helplines accessible to Reserve members ('SERCAT 3–5') are provided at [Annex A](#).

Similarly, veterans (former members of the ADF) access healthcare as other community members do, but also have access to the Department of Veterans' Affairs (DVA) services.

Veterans may also access a range of other DVA mental health services on referral from their general practitioner (GP) through non-liability DVA cover (i.e. their mental health condition does not need to be service-related). Further information about DVA healthcare is available here: [Quick guides and tools | Department of Veterans' Affairs](#)⁴. Some DVA supports may be accessible for some reservists as well, depending on the nature of their service.

Open Arms – Veterans & Families Counselling (Open Arms) provides mental health and wellbeing support for current and ex-serving members of the ADF and their families. This support includes mental health counselling, relationship and family counselling, care coordination, peer support services, group programs and digital health initiatives. Support is available 24/7 on **1800 011 046** for crisis assistance and service navigation, with self-help resources available on the Open Arms website at [Open Arms - Veterans & Families Counselling](#)⁵.

² <https://www.openarms.gov.au/resources/professional-development-military-awareness>

³ <https://medcast.com.au/veterans-health/mental-health>

⁴ <https://www.dva.gov.au/providers/patient-care/quick-guides-and-tools>

⁵ <https://www.openarms.gov.au/>

Helplines



In-person support

- Leaders (Commanders, Managers, Supervisors)
- Peers, Family, Friends
- Garrison Health Centre staff (ADF)
- General Practitioners (APS/Contractors)
- Mental Health and Health Professionals
- Chaplaincy
- Wellbeing Support Personnel

SUPPORT LINE 24/7 PHONE SUPPORT	ADF SERCAT 6-7	ADF SERCAT 3-5	ADF CADETS	APS	FAMILIES
Defence All-hours Support Line (ASL) 1800 628 036 A 24/7 confidential service for ADF members and families that connects you with mental health professionals. They help you access psychology, medical, social work, and chaplain services when you need them.	✓	✓			✓
Defence Member and Family Helpline 1800 624 608 A 24/7 helpline staffed by qualified social workers and psychologists for ADF members and their families. They provide support, information, and connection to your local Defence community.	✓	✓			✓
1800 IMSICK 1800 467 425 A 24-hour nurse triage and health support for ADF personnel who become ill or injured after hours or off-base. Registered nurses provide health guidance and help you access appropriate care.	✓				
Defence Chaplaincy 1300 333 362 24/7 on-call Chaplaincy services within Defence provide independent support and referrals to assist with accessing health and wellbeing services for ADF members and their families. Call and ask to speak to the on-call Chaplain in your area for pastoral care, support or advice.	✓	✓	✓	✓	✓
Open Arms 1800 011 046 Free and confidential 24/7 counselling for anyone who has served in the ADF and their families. Counsellors understand military culture and provide individual, couple, and family support for mental health and wellbeing.	✓	✓			✓
Defence Employee Assistance Program 1300 687 327 Free, confidential 24/7 counselling for Defence APS employees, Reservists, Cadets, and their immediate families. Professional counsellors provide support for work and personal concerns.		✓	✓	✓	✓
First Nations Helpline 1300 287 432 Employee Assistance Program specialist helplines – available 24/7	✓	✓	✓	✓	✓
SeMPRO 1800 736 776 (1800 SeMPRO) Immediate and confidential 24/7 support and advice for anyone impacted by sexual violence in Defence. Support is available without needing to make a report. They also provide advice for command and managers supporting victim-survivors of sexual violence.	✓	✓	✓	✓	✓
National Alcohol & Other Drug Hotline 1800 250 015 Free and confidential 24/7 advice about alcohol and drug concerns for yourself or someone else. The service connects you to your state or territory alcohol and drug information service.	✓	✓	✓	✓	✓

SUPPORTS

SUPPORT LINE 24/7 PHONE SUPPORT	ADF SERCAT 6-7	ADF SERCAT 3-5	ADF CADETS	APS	FAMILIES
Suicide Call Back Service 1300 659 467 Free professional 24/7 phone and online counselling for anyone affected by suicide. Trained counsellors provide immediate crisis support and up to six follow-up sessions.	✓	✓	✓	✓	✓
Lifeline 13 11 14 A 24/7 crisis support service providing confidential counselling for anyone experiencing emotional distress. Trained crisis supporters listen without judgement and help you explore options.	✓	✓	✓	✓	✓
Men's Line 1300 789 978 Free 24/7 counselling service for men with relationship, mental health, and wellbeing concerns. Professional counsellors provide practical support and strategies for managing personal situations.	✓	✓	✓	✓	✓
Beyond Blue 1300 224 636 Free 24/7 mental health counselling by phone, online chat, or email for anyone in Australia. Counsellors provide support for anxiety, depression, and other mental health concerns.	✓	✓	✓	✓	✓
Q Life (3pm to midnight) 1800 184 527 Anonymous peer support and referral service for LGBTIQ+ people run by LGBTIQ+ community members. Available 3pm to midnight daily by phone or webchat to talk about sexuality, identity, gender, relationships, and mental health.	✓	✓	✓	✓	✓
Kids Helpline (For those ages 5 – 25) 1800 551 800 Free, private, and confidential 24/7 counselling for young people aged 5 to 25. Qualified counsellors provide phone, webchat, and email support for any concern.	✓	✓	✓	✓	✓
13YARN* 139276 * for First Nations Personnel Free 24/7 crisis support for Aboriginal and Torres Strait Islander people, run by Aboriginal and Torres Strait Islander crisis supporters. A culturally safe space to yarn about your concerns without judgement.	✓	✓	✓	✓	✓