

Developing Partnerships in Community Mental Health
~~~~~  
**Medicare Locals and Community Managed Organisations**

Thursday 27 March 2014

Presented in partnership by:  
General Practice NSW (GP NSW) and the Mental Health Coordinating Council (MHCC)

## Forum Notes

Consolidated notes from group work: Combined Perspective of MLs & MH CMOs

### OPPORTUNITIES FOR CONSUMER FOCUSED SERVICE DESIGN

- Need to drive the “Consumer Voice” into the performance improvement cycle.
- Moving the system through “Person Centred” and on to “Self Directed Care” will require
  - agreed common definitions
  - agreed common language
  - improved understanding of ‘recovery’ approach  
<http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-pubs-n-recovfra>
  - consumer leadership
  - agreed organisational purpose, ‘can do’ culture and common objectives
  - supported & well-resourced training and evaluation processes
- Partnership - Critical success factors
  - mutual respect for skills and capacities
  - open and transparent
  - clarity regarding roles and responsibilities
  - willingness to address areas of difference
- Challenges
  - maintaining a robust relationship
  - maintaining corporate memory
- Peer Workforce requires
  - well resourced support and training
  - documentation around ethics and national standards
  - removal / caution against “Expectation of Failure” (guard against a ‘self-fulfilling prophecy’)
- Standardised Support Systems required
- Attention to the emerging focus on ‘Health Literacy’
  - need for on-line resources for MH consumers
  - how to navigate around the system is HUGE issue

- Need to identify 'Who is providing services locally'
  - consider establishment of single & trusted 'Source of Wisdom'
  - currently very hard to identify and validate
  - MHA re-developing MH Service Directory – enlisting MLs (and other MH Orgs) for funding and support.
  
- More attention to /engagement with people with 'persistent and complex mental health conditions.
  - not a well know categorisation
  - not a well serviced cohort
  
- Establishing Communities of Practice including Consumers & Carers
  - develop shared language
  - questions of inclusiveness
  - examine diversity of services
  
- Organisationally develop a "start at home" culture for service providers
  - is the organisation 'consumer safe'?
  - provide training / develop skills & knowledge of front desk staff.
  
- GPs as Gatekeepers
  - requires training for GPs
  - ATAP Providers – Recovery Focus
  
- Funding
  - brokerage funds need to be attached to funding programs
  - additional identified funding required for translation to mainstream at end of program
  
- Greater recognition of individual recovery journeys for individual people
  - language to aid / facilitate/ support recovery
  
- Central Intake System needs to enhance consumer choice within such a model
  
- Leadership required across sector
  - prepare **now** to sustain / embed legacy of PIR