Conference Abstract Oral presentation

Recovery oriented consumer focused practice: Emerging critical success factors in establishing a culture of collaboration to support our most vulnerable community members

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Abstract

Introduction: Consumer focused integrated care requires a whole of system paradigm shift for the myriad of community and government service providers that provide support to individuals who are impacted by severe and complex mental, physical and social health issues. Service providers often work in silos due to narrow and specific contractual obligations, and in competition due to ever diminishing government funding. Increasingly consumers most needing support are further marginalised, bounce between agencies and eventually disengage from a chaotic system. The Partners in Recovery (PIR) initiative provides a consumer centred, integrated, collaborative partnership approach to supporting some of our most marginalised and disadvantaged individuals in being active participants in their own recovery.

PIR contracts were awarded in mid 2013 and the current funding concludes in June 2016. While PIR is still in its infancy, ConNetica is providing support to 7 PIR projects across Australia as either a local evaluation coordinator or expert adviser. This has enabled the collation of qualitative and quantitative data with identified critical success factors and key findings related to service collaboration, integration and recovery oriented practices.

Description of practice and context: The PIR process supports individuals who have persistent and complex needs that are not being met through the traditional fragmented service provider structure. PIR places the individual consumer, with support from their families and carers, at the centre of a holistic, individualised and flexible process focused on maximizing recovery with the consumer actively participating in the development of their recovery plan.

The positive impact of flexible funding available to meet the immediate and personal needs of consumers, usually not available through traditional avenues, cannot be underestimated. Through a collaborative and integrated consumer focused recovery model PIR ultimately encourages whole of system change.

Description of change implemented: The PIR initiative is coordinated through a lead agency, providing leadership and coordination to enable strategic partners to work together in the development of the governance structure, directly increasing engagement and collaboration. Consortium partners and stakeholders work together to develop and refine practices while support facilitators are based at host agencies, supervised by team leaders.

Support facilitators work directly with consumers, assisting them to identify their current recovery needs and coordinating access to a range of services to ensure needs are met. Support facilitators aim to establish a system of collaborative active partnerships between service providers, extended beyond the traditional boundaries of mental health services. They become the conduit for consumers to take ownership of their own recovery, supporting them to access services, while leading practices that create a cultural shift in understanding of the need for collaboration and innovation within the service sector.

Objective of the change and targeted population: The PIR process supports individuals who are experiencing severe and persistent mental health issues and have been unsuccessful in receiving a response from multiple agencies. Key goals of the initiative are to improve and sustain service collaboration and integration, and ensure provision of recovery oriented practice.

Stakeholders engaged: Stakeholders include the consumers, their families and carers. Lead agencies include Medicare Locals and NGOs. Additional partners and stakeholders include the broader community sector, government mental health services, primary health care providers (physical and mental health) alcohol and other drug treatment services, income support services, education, housing and employment supports.

Theory/Methods used: ConNetica has developed key measurement principles to assist each PIR consortia to develop and implement local evaluation plans. Action learning and a program logic framework enables needs assessment, process evaluation, outcomes evaluation and impact evaluation to be conducted using a range of data collection methods and tools. Service mapping, client experience of care and workforce development needs are part of the local evaluation process.

Highlights: While relatively early in the process initial data indicates that consumers are benefiting from the client centred recovery process. A sense of hopefulness, increased confidence, engagement in identifying and achieving current goals and developing plans for the future has characterised consumer feedback.

Support facilitators have generally identified greater collaboration across internal and external agencies and partners' awareness of the PIR paradigm has increased propensity for reflection on alternative options to traditional processes. Challenges remain in engaging clinicians and some mental health services in the initiative, while there is an ongoing need for review of systems and processes, and ongoing education across all stakeholders. In some areas there is also a lack of services for consumers to access.

Conclusions: Preliminary findings demonstrate that consumers benefit from the development of recovery focused consumer centric practices that require shared understanding and collaborative systems of practice. As with any change management process time is required to identify, refine and imbed practices across the broader sector that contribute to lasting systemic and cultural change.

Keywords

mental illness; consumer focused integrated care; system collaboration

PowerPoint presentation

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