

Strengthen the Team

mental health provider collaboration

Presenters:

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Mental Health Provider Collaboration project

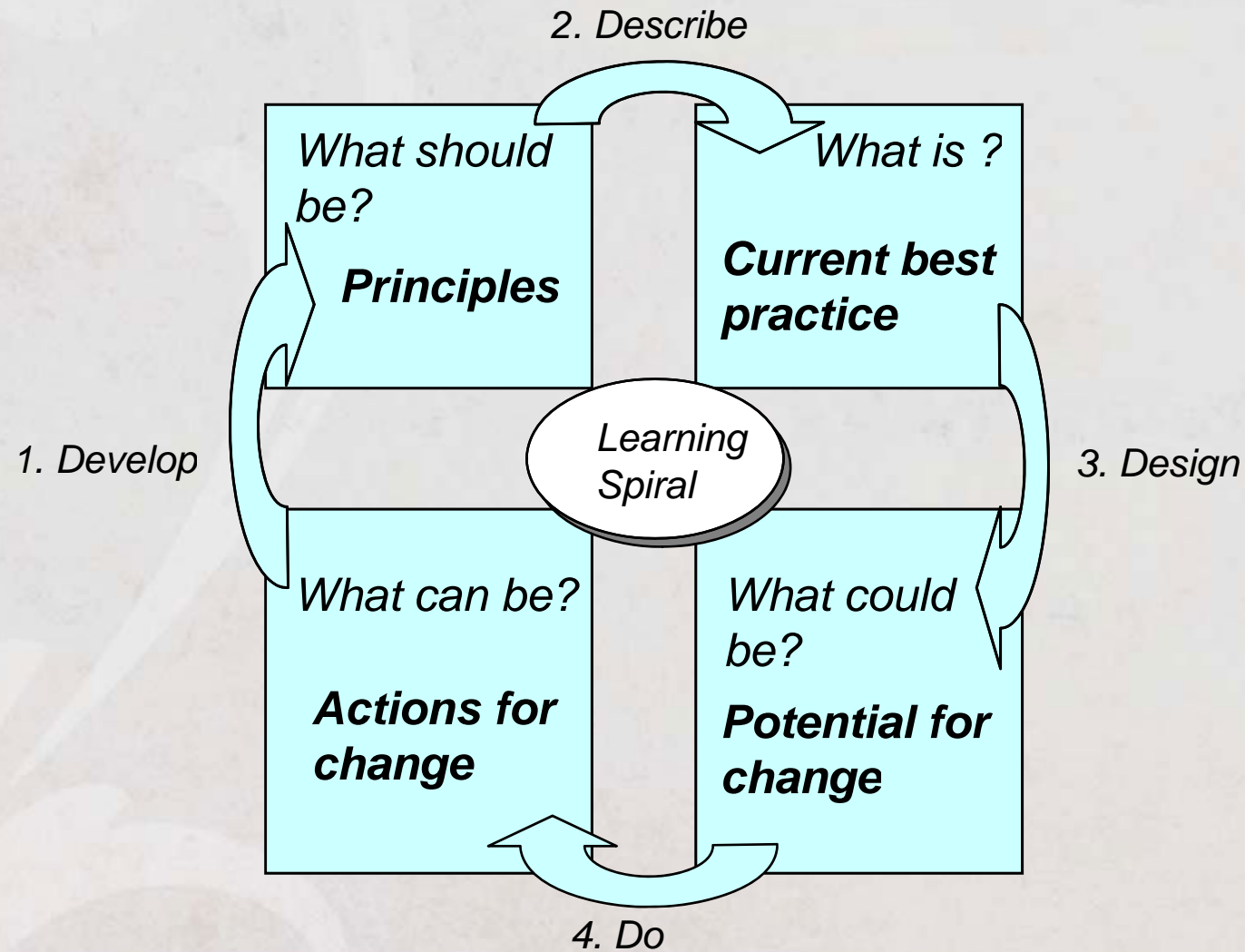
The goal is to:

explore ways to improve working relationships or collaboration, between non-government organisations who provide services for people with a mental illness, and their families, in the Ipswich and surrounding areas.

Mental Health Provider Collaboration

- Non-government sector
- Strategic collaboration
- Build capacity of individuals and organisations
- *Social change processes take time*

Decisions into Practice



Project design

- Inclusive of diverse stakeholders
- Active participation
- Information collected, discussed, reviewed & refined
- Foster on-going collaboration
- Different way of thinking



Pre-determined picture

Requires:

Careful observation

Good memory

Accuracy

Reproduces what is

Current state of mental health services

- “Ipswich rocks”
- “NGOs have a great community spirit, and great reciprocation between services”
- “Ipswich is accepting, possibly because they have always had mental health clients”
- “It is a passionate job; we are not in it for the money”
- “I don’t think it (*collaboration*) can be improved “
- “We have been unable to resolve how services can work better together. We don’t know how to make connection.”

***“It’s really about the logistics
of collaboration.***

How do we actually do this?”

Communication

Within and between organisations:

“We have a strong management committee and a steering committee that assist with problem solving, staff retention, advice for dealing with clients. We have a very good support network, and good support from management”

“Some inter-agency meetings lack relevance”

“No overarching link. Meetings need to be linked ... people stay with their own industries”

Collaboration

Operational rather than strategic

Positive stories, sometimes initiated by NGOs

Hospital, IMH, clinical services

“It cuts both ways. The Case Manager’s job would be easier if they knew what was happening with the client’s life and with the NGOs”

Respect

- *“If you’re non-clinical you don’t know”*
- *“Families do have expert knowledge about that person and about how that person interacts with them, with society”*
- *“There is a lack of respect from clinical services and poor role definition”*
- *“The client will wait 12 hours at hospital with a support worker; if a client went alone they get in straight away”*

Protocols and policies

- *Shared protocols*
- *Referral process*
- *Stakeholder meetings*

“The policies in Queensland are some of the best in the world”

Funding

*“Complementary services are funded from different sources and decisions are made on a self-protection basis, **not** collaboration ... There are a number of mental health service providers offering similar services. They will not collaborate if there is potential to decrease funding”*

“People’s needs change, but funding doesn’t ... you can’t increase a client’s needs, only drop them ... the nature of mental health, sometimes it is controlled, then it spirals out of control”

So why is collaboration at a strategic level so difficult?

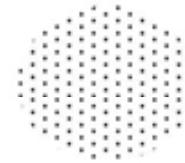
Knowledge cultures of Western decision-making

Knowledge culture

INDIVIDUAL KNOWLEDGE

Lived experience, identity

Structure



Sources of truth

Memory
Learning style
Five senses

Sources of ignorance

Subjective
Limited
Vague

LOCAL KNOWLEDGE

Shared experience of people and place



Stories
Events
Symbols

Gossip
Anecdote
Inaccurate

SPECIALISED KNOWLEDGE

Mono, multi & trans-disciplinarity, the professions



Inquiry
Measurements
Observations

Jargon
Irrelevant
Narrow

ORGANISATIONAL KNOWLEDGE

Administration, government, industry, strategic thinking



Agendas
Alliances
Networks

Deals
Mates
Corruption

HOLISTIC KNOWLEDGE

Essence, core, purpose
Heart & Soul



Synthesis
Focus
Creative leap

Airy-fairy
Impossible
Impractical

What can be?

“Flexible organisations to respond to local needs”

“A strategic approach to training and development”

“Peer support training is needed”

“Mental health network for service providers ... because at present it is dependent on individuals”

“The focus needs to be re-gained and the focus needs to be on the client and the service”

“Collaboration would decrease the pressure on IMH, increase client support, increase money, increase resources and decrease conflict”

What's happened

- Formation of network NGOs to work together on mental health
- 2 working groups
 - Protocol for the network
 - Discharge process: collaboration between Ipswich hospital and NGOs