



North Queensland Mental Health Consortium

HOW TO FORM
PARTNERSHIPS THAT WORK
&
CREATE INNOVATIVE PRACTICE

THE “BUILDING LINKS” PROJECT

Outline of the Project

The Building Links research project components:

- **Part A:** Supported Accommodation models
- **Part B:** Collaborative practices between Mental Illness Fellowship of North Queensland (MIFNQ) & Supported Options in Lifestyle and Access Services Inc. (SOLAS).

Part A - The Process

- A community development action research model including:
 - literature review
 - Project Reference Group
 - individual interviews
- Research findings:-
 - successful living requires the right support services
 - use care co-ordination model

Part A - The Process

- All stakeholders agreed that the *Support consumers required was now the focus*
- Engage with the *Care Coordination Model*

Final Project Recommendations

- 1) Funding focus on individual needs not building specialist accommodation.
- 2) Funding focus on the coordinated support in supported accommodation of choice.

Final Project Recommendations

- 3) Care Coordination Model used to wrap services around the individual needs - may require changes in service.
- 4) The range of community accommodation options be expanded within the :
 - Public Housing Sector
 - Social Housing Sector
 - Private Housing Sector

Final Project Recommendations

- 5) The mental health sector supports expansion of housing stock within the Townsville region - meet the needs of individual people.

"Its not just shelter you want, it's a place you call home"
(Consumer: 2008)

Part B - Collaborative Practice

- The North Qld Mental Health Consortium – Specialist Mental Health Services...
 - Mental Illness Fellowship of NQ (MIFNQ)
 - Supported Options in Lifestyle and Access Services Inc. (SOLAS)
 - Advance Employment Inc

Part B - Collaborative Practice

- hopes, vision and ideas
- plan for future action
- Memorandum of Understanding
- exploration of future ideas
- review of the Consortium

Project Findings

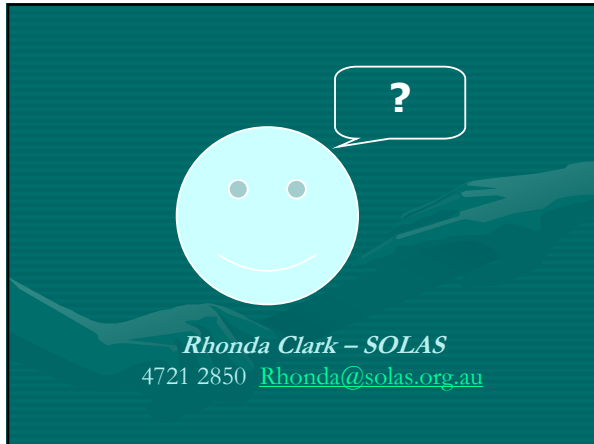
Forming this partnership has assisted services to:

- Consider other services when planning
- Individual vs Consortium delivery
- Share knowledge/information
- Share workers
- Work jointly on projects
- Apply for tenders not previously considered
- Work more creatively
- Develop shared responses to political issues

Why did this small Project achieve so much?

People - The important ingredient in all Community Services are not neglected!

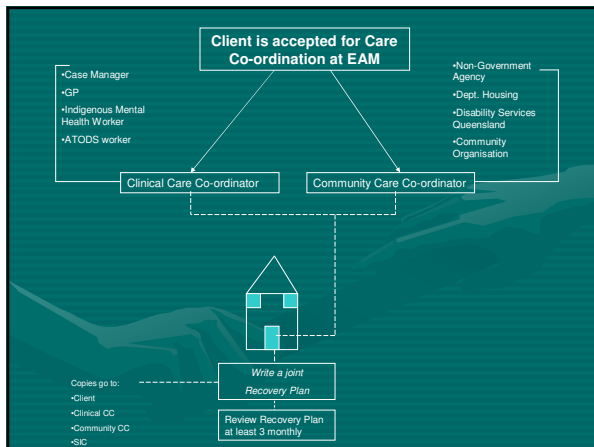
This project has been a wonderful example of what can be achieved with little funding outlay but with a great deal of bringing together, "the right people with the right attitude at the right time." Building Links Project 2008



WORKING IN PARTNERSHIP TO IMPLEMENT THE “CARE CO-ORDINATION” MODEL

- Dept Communities funded SOLAS to undertake the “Building Links” Project.
 - Looked at how NGOs could work better together
 - Started to look at housing crisis issues in Townsville
 - Realised not house but services and care delivered around an individual (care co-ordination)
 - Key Players (DSQ, Housing, Health, NGOs) identified and meeting to discuss

- ### Implementation of COAG Care Co-ordination Model Happening in Parallel
- Queensland Plan for Mental Health 2007-2017 Priority 4 – Co-ordinating Care. Implementing a Care Co-ordination Model
 - Care divided into Clinical Care (MHS) and Community Care (NGO) with both co-ordinated so that there is a more holistic approach to client care provision



- Service Integration Co-ordinator appointed in October 2008.
 - Almost as if planets had aligned
 - Key players already meeting
 - Mindset was already on co-ordinating services around an individual more efficiently
 - “Care Co-ordination” was already on the radar.

- Care Co-ordination Steering Committee Established on 5th December 2008
 - Steering Committee is the major driver for the implementation of the Model
 - Membership is department heads from: Queensland Health, Dept Housing, Disability Services Queensland, Dept Communities, SOLAS, MIFNQ, Advance Employment, Ozcare, ATODS and SIC. Membership will grow over time.
 - Meeting bi-monthly with terms of reference

- Local Partnership Agreement signed off by members of the Steering Committee on 18th December 2008
 - Enthusiastic Group
 - Respect
 - Action
 - Deal with issues
 - A commitment to “just do it”
 - Action learning approach for small trial.
 - Nominated members for the Local Area Network Group.

- Local Area Network Group
 - This group is the panel for the EAM and makes decisions around referrals.
 - Aim of group to work through forms, model, systemic issues and processes and implement innovative solutions.
- First Eligibility Assessment Meeting was held on 29th January 2009
 - 2 clients accepted to trial Care Co-ordination Model, forms, processes.
 - Advance Employment Community Care Co-ordinator and GP clinical care co-ordinator.

GOVERNANCE STRUCTURE CARE CO-ORDINATION MODEL



So Where to from Here?

- LANG has reviewed forms, the model, operational protocols and guidelines, and processes
- The next Eligibility Assessment meeting (referrals) will be held on 21st July 2009.
- Hoped that each participating agency will be carrying at least one client on the co-ordination model
- Roll out progressively over time.
- Review the Local Partnership Agreement and Terms of Reference in December 2009



Kathy Whitehead – T/ville Mental Health
4796 3392 Kathy.Whitehead@health.qld.gov.au

FORMATION OF THE “NORTH QUEENSLAND MENTAL HEALTH CONSORTIUM”

Why Bother?



Components

- Values and Vision
- ‘Fit’
- History
- Process
- Challenges
- Success

Values and Vision

- Closely aligned values and vision essential
 - Organisational
 - Consortium
- Focus on better outcomes for consumers and families
- Organisational growth ‘means’ not the ‘end’
- Not a means to amalgamation
- The ‘Lived Experience’

‘Fit’

- Competitive vs. Collaborative
 - Placement in market
 - Stage of Organisation
- Personalities
 - Early stages
 - Longer term
- Opportunities available?

History

- Working together
- Not always plain sailing
- Common frustrations with MH System
- Alignment of CEOs
- Committee of management alignment
- Vision for Future

Process

- Agreement in principle to progress
- Utilised Building Links Project
- Developed parameters for the partnership
- Staff and Mgt. Committee Engagement
- MOU
- NQ Mental Health Consortium Launch

Challenges

- A new way of thinking
 - Consortium
 - Organisation
- Individual or system driven?
- 'Exclusivity'
- Embedding throughout organisation
- Negative views of others

Success

- Enhanced opportunities
 - specialisation through collaboration
- Enhanced scope and quality of tenders
- Strong fit with government agenda
- Enhanced influence in sector
 - Speaking as One
- Initial tender success

Partnership 'Test'

| | |
|------------------------------|---|
| Individual Excellence | Partners have something of value to contribute. They are good at their core business |
| Importance | Partners share major strategic objectives in common so they want to make the partnership work. |
| Interdependence | The partners need each other. They have complementary skills. They cannot do separately what they can achieve together. |
| Investment | Partners are willing to invest long term and are willing to commit resources - in terms of time, people and/or money |
| Information | Partners are willing to share information. There is an open relationship. |
| Integration | Partners develop linkages and shared ways of doing things. |
| Institutionalisation | The relationship is given a formal status with clear responsibilities and decision-making processes. |
| Integrity | Partners behave in an honourable way and do not undermine each other. |

'Collaborative Advantage' published by Harvard Business Review (July-August 1994) Rosabeth Moss-Kanter



Andy Froggatt –MIF NQ

4725 3664 andyfroggatt@mac.com

“SOCIAL FIRMS” RESEARCH PROJECT

Organisations Involved

- NGO's...
 - Advance Employment Inc.
 - MIFNQ
 - SOLAS
 - headspace
- Researcher...
 - James Cook University – Discipline of Occupational Therapy.

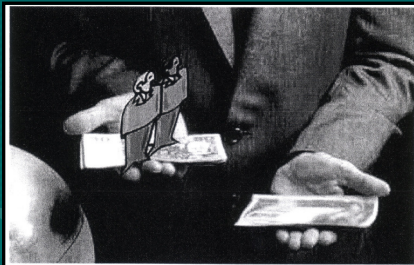
Aim of Research

- Research Social Firms models relevant to Townsville region.
- Investigate a range of business ventures - regional, state and national level - focus on financial viability & applicability.
- Recommend specific potential business ventures.

History of Social Enterprise

- Building financially sustainable enterprise/s
- Address social and economic outcomes of poverty
- Mutual aid links back to...
 - Workers and consumer co operatives
 - Friendly societies
 - Credit unions
- Regulated and limited to ensure no competition against government and/or private enterprise
- Current welfare reforms

Tricky Questions of *Values*



Defining Social Enterprise D. Langton & I. Burkett

Defining Social Enterprise

- Diversity of definitions - Social Firms fall under the banner of Social Enterprise
- **Purpose** – public good, public interest &/or collective benefit – not private interest or gain
- **Process** – social purpose via “*enterprising orientation*”
- **Production** – high quality goods & services – support for workers – additional training

Defining Social Enterprise

Participation – maximising participation and control for stakeholders

Profit – financial sustainability – financial profit balanced with social/environmental profits. Profit reinvested into business.

People – investment in people and relationships between people. Well being of employees and stakeholders.

Defining Social Enterprise – D Langdon & Ingrid Burkett

Enterprising Orientation



Defining Social Enterprise D. Langton & I. Burkett

Social Firms

- Set up specifically to create employment for people with disabilities
 - Empowerment
 - Employment
 - Enterprise (not welfare)
- Real jobs
- 25% of workforce
- 50% of income through sales

Types of social firms

- Ground up
- Acquisition
- Replication
- Franchise of existing social firm/s

Unemployment & Mental Health

- Long term unemployment for people with disabilities...
 - Impacts on both the individual and the community
 - Financial hardship
 - Social exclusion - Isolation
 - Psychological consequences
- Social , political, micro & macro economic cost

Employment & Mental Health

- Social Inclusion – enhanced social support networks
- Reduced dependency & psychiatric symptoms
- Symptom reduction
- Increased self esteem
- Increased personal empowerment
- Opportunity for structure, socially valued roles and status (Waghorn 2005)

Current Employment

- Firms with a social conscience - do employ people with a disability
- Competitive or Open Employment
- Vocational training – does not result in long term employment - lack of support
- Sheltered work environment

How are Social Enterprises Different?

Production

- Efficiency of production
- Effectiveness of production
- Financial sustainability & profitability



Support

- Orientation to work
- On-the-job training & supervision
- Emotional & Relational support
- Ongoing supportive feedback



Ethical & Social Justice Responsibility

- Every person has the right to work (human rights 1948 – Crowther 2008)
- Work that promotes and reflects...
 - Equity
 - Human dignity
 - Security
 - Respect (Waghorn 2005)
- Governments have a social justice obligation to that people are not condemn people to a life of economic & social marginalisation (Waghorn 2005)

Community Benefits

- Social to social business opportunities
- Builds community capacity
- Reduces reliance on government benefits
- Advocacy
- Reduces stigma
- Less burden on NGO and carers
- Reduced hospital costs

Examples of a Social Firm

SEED program, SANDBAG

- The SEED Program is a community enterprise auspiced by SANDBAG (Sandgate & Brackenridge Action Group Inc), an NGO that works developmentally in Sandgate and surrounding Suburbs.
 - catering group is working towards the establishment of a licensed kitchen space in the new Sandgate Community Centre.
 - community nursery that will produce organic seedlings and gardening products for the community.

Social Firm vs Competitive Employment

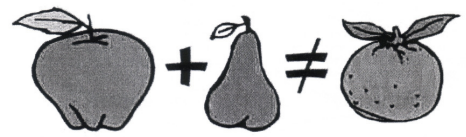
Social Firm

- Business costs
- Sustainability
- Risk of sheltered workshop environment
- Identified workplace – risk of isolation
- Reduced ability to provide job of choice
- Training opportunities
- Risk of reduced career path planning

Competitive Employment

- Business costs – employer
- Sustainability – employer
- Job placement funded
- Worker integration
- Non identified workplace - inclusion
- Greater ability to provide job of choice
- Training opportunities
- Ability to career path plan

Where to from here??



*"Where we finish may be different
from the plan when we started."*
Flexibility is a key principle

Defining Social Enterprise D. Langton & I. Burkett



Cathy O'Toole – Advance Employment Inc.

4725 1155 cathy@advemp.org.au