Interagency Collaborative Care Planning with the Consumer at the Centre

The Way Of The Future
Background

The focus of the project is early intervention:

“Early in Life, Early in Illness and Early in Episode”

The project aims to achieve systemic change across a number of sectors including mental health, primary care, education, family and welfare services, alcohol and other drug services, early childhood development and youth specific services

Supported by 16 Consortium member agencies along with a growing network of partners across the clinical and non-clinical sectors
Why create an interagency coordination model?

1. To provide appropriate and timely coordinated support.

2. To develop a service system to support interagency care planning.

3. To ensure the routine provision of evidence-based best practice interventions within a client-centered, family inclusive context.
Criteria

The target group is defined as being children and young people (aged between 0-25 years) with both multi-agency involvement and complex needs:

- Who are/should be seen by more than one agency and more than one discipline

- Have multiple issues/problems that need to be addressed concurrently

- Whose outcomes are likely to be better if the care and services they receive are coordinated across agencies and over time
The Process of Developing an Interagency Model

- Principles to establish Interagency Culture
- Underpinning Procedures
- Service Delivery
The Process of Developing an Interagency Model

- Valuing and respect for infants, children, young people and their families; keeping them at the centre of our thoughts, conversations and decisions.

- Mutual respect for individuals and the agencies they represent.

- Regular, open and honest communication with in privacy and confidentiality guidelines.

- Acknowledgement of the skills and strengths of each other.

- Collaborative decision making that is non-hierarchical.
Principles to establish Interagency Culture

Underpinning Procedures

Service Delivery

• Interagency Coordinated Referral Process
• Interagency Collaborative Care Planning
• Interagency staff induction & education strategy
• Process of ongoing evaluation and review

The Process of Developing an Interagency Model
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- **Principles to establish Interagency Culture**
- **Underpinning Procedures**
- **Service Delivery**

Young person & their family’s needs are identified & appropriate intervention/support in place.
The Interagency Model

- Client centered
- Family inclusive
- Collaborative approach
Sharing of Information

• Key challenge for interagency collaboration

• In keeping with the principles “to place the child, young person and their family at the centre”, the best approach to sharing information is to gain consent.

• With appropriate consent obtained, the information can be shared and workers are in keeping with relevant legislation.

• However, in instances where a person’s immediate safety is at risk there is provision for information to be shared to ensure that person’s safety.
Benefits for Service Providers

This approach has enabled more timely and improved outcomes. This is evident when I reflect on the client goals that have been achieved.

It was fantastic, timely and a relief. It allowed me to get on with my role, with the reassurance I was referring properly to other services.

Having all the client’s team together to discuss how everything is going, what our roles are and what we are doing with the client.
Benefits for the family/carer:

- Enhanced support
- Clear understanding of roles and responsibilities
- Active participation
- Improved outcomes

From the family perspective, felt great to be included, given role clarity and their problems taken seriously.

The young person and his carer felt supported and it also took away some of the fear they had regarding workers - particularly Child Protection.

Carer has an overwhelming role and the regular meetings allows her to voice her experience and issues, gain support and understanding and have a clear knowledge of the various roles and who to talk to should crises occur.
Consumer Reported Outcomes

- Reduced rate of suspension
- Reengagement in education
- Improved mental health & wellbeing
- Engagement in work experience
- Consumer voice was heard and valued

It was better than the other times that we’ve had to see people. They didn’t really know us very well, and we got sick of always having to start at the beginning every time we saw someone different – some times then, we couldn’t be bothered. But this was good, it was better

Everybody being together and talking about me with me there, and also me having a chance to say what I think as well

It was better than the other times that I’ve been to see someone. I had better results with this

I didn’t have to repeat my story
Summary & Questions
Thank You

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