



A Family Inclusive Mental Health Organisation.

-what does it look like

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TODAY'S DISCUSSION



Changing views of mental health families around the western world

Policy direction in Australia

Service provision – *why we do what we do*

A family inclusive model of care – *the ingredient list*

The journey

Conclusion



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CHANGING VIEWS



During the last century families in Australia (*and around the western world*) had little participation in the care and treatment of their family member

The views of researchers about the involvement of families in the treatment of mental health issues have changed throughout the last thirty years.

A shift away from families being implicitly blamed for causing the illness/disorder within their family member

Contemporary research indicates that involving families in treatments has been continually demonstrated to reduce relapse rates and facilitate recovery of persons who are experiencing mental ill health



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FROM RESEARCH TO POLICY



It has been the continuous efforts family advocates that have been the driving force behind changes to Australian Mental Health Policies

The interesting and worrying fact is that after twenty years.....

- the standard mental health service, including private practice is yet to fully realize the involvement of families and carers at all points of the service delivery system.

The outcome is that families and support people are consistently reporting negative experiences after having engaged with mental health services.



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BALLARAT HEALTH SERVICES

SERVICE PROVISION



Western Victoria; known as the Grampians Health Region,

Covers some 48,000 square kilometres

Services population of over 240,000 people

Major population centre - City of Ballarat

**Community treatment, residential and inpatient
– incorporating**

***Infant and Child; Youth;
Adult; Aged.***



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IMPLEMENTING A FAMILY INCLUSIVE MENTAL HEALTH ORGANISATION

– *WHAT CHANGED*



“The routine provision of internationally recognised, evidence-based and ‘best practice’ treatments, for psychiatric illness to our clients, their carers and the community, within a family inclusive recovery framework”

Four systemic key areas of change that the service took on:

- **Structure of the service**
- **Clinical knowledge and skills development**
- **Clinical accountability of the service to clients, their families, carers and the community**
- **Change of culture**



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THE INGREDIENT LIST



1. **A family inclusive treatment model** - *provides a formal framework*
2. **A new Documentation set** - *includes the family perspective from first point of contact to recovery*
3. **A Comprehensive internally and externally provided training and education** - *focuses on core skills that a clinician requires to work with families and support people.*
4. **Supervision** – *maintains practice with respect to family involvement*
5. **Organizational policy and protocols** - *guiding documents for practice accordingly families are included at all levels of service*



THE INGREDIENT LIST



6. **Family leadership** - *ensure family needs are addressed from an individual level, to team to service wide and all governance planning*
7. **Family participation, engagement and partnership** - *Families are vital and intrinsically valuable partners in all the planning, delivery, monitoring and evaluation of the service*
8. **A recovery orientation** - *each individual is capable of personal recovery and of living well . The support of family is integral to recovery from mental illness. Families also need to recover.*
9. **Leadership sets culture** - *Leadership is critical for the effective implementation of family involvement*
6. **Family inclusive progress indicators:** *from a service perspective & from a family and support person perspective*



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THE JOURNEY



The change to a family inclusive service involved considerable planning and adjustment over a number of years.

It is not enough to add new ways of working; you must remove old systems that reinforce exclusionary practices

The culture of the service has change dramatically over the years;

Increased general effectiveness in the organization and improved levels of client and family satisfaction.

Change is a process that takes time;



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2006 to 2012 Family Survey

Were you involved in the development of the Clinical Treatment Plan of the person you care about?	Yes, definitely	No	Missing
2012	60%	33%	7%
2010	54%	44%	2%
2008	47%	47%	7%
2006	25%	51%	3%

Do you regularly attend the meetings with the psychiatrist or treating clinician and the person you care about?	Yes, definitely	No	Missing
2012	66%	30%	4%
2010	57%	35%	9%
2008	54%	43%	3%
2006	28%	61%	11%

2012 New Questions

Has the Treating Clinician asked you questions and assisted you with your understanding of the illness?	Yes	No
2012	70%	30%

Has the Treating Clinician asked you questions and assisted you with your thoughts on recovery of the person you care about?	Yes	No
2012	64%	36%

Did the clinician give you an appropriate response to your concerns in a timely, coordinated and professional manner?	Yes, definitely	No	Missing
2012	74%	16%	10%
2010	65%	26%	9%
2008	71%	21%	8%
2006	43%	41%	1%

Where we can do better

Do you feel that you have developed confidence in caring for your family or friend as a result of the interventions from this service?	Yes, definitely	Yes, to some extent	No	I don't know	Missing
2012	38%	29%	19%	8%	5%

The average 2006 Comments

“I have almost never had a useful sharing of opinions or ideas with Psychiatrists or whoever.”

The average 2012 Comments

“In the last 12 months we found much more support than we did two years ago and were much more informed and included.”

CONCLUSION



The journey families and support people take with the person they care about or support involves can involve new and changing experiences both good and challenging

It is not a simple task to ensure an organisation achieves active and meaningful family involvement

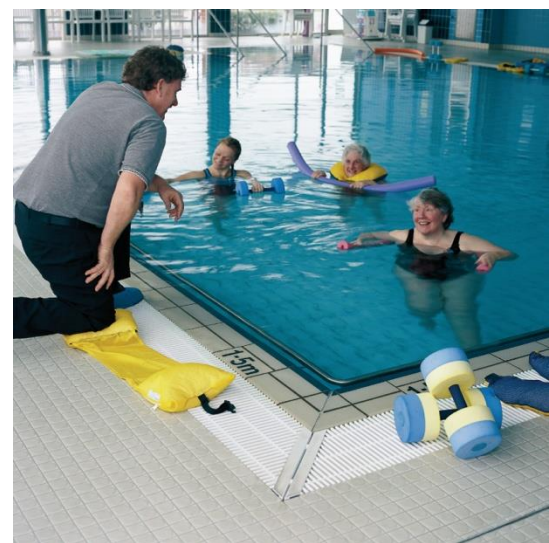
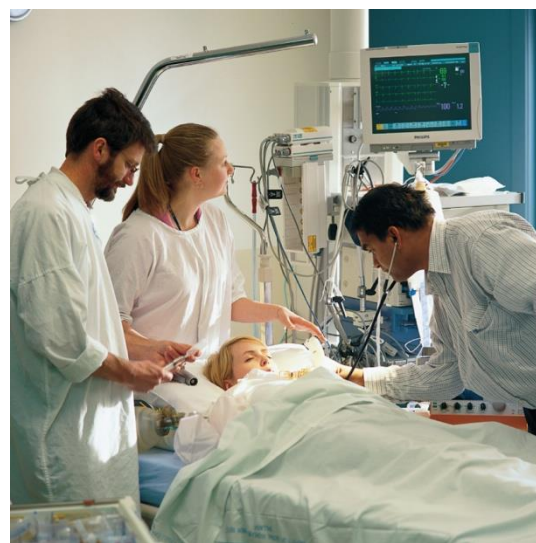
Effective family inclusion is a task involving a high degree of skill and commitment

To reform, an organisation must have a strong and shared vision and adhere to it

The lived experience of people with a mental health difficulty, their families and support people are vital



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Thank you



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