

# Getting in Early:

## *A Multi-Phase Approach to Community Engagement and Mental Health Training*

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Presented by:

Michelle Cowie Scott, Dementia Behaviour Consultant, Ballarat Health Services

Robyn Fletcher, HACC Project Worker, Grampians Region





The Getting in Early intervention and community engagement project was initiated by the:

- Department of Health, Victoria
- Ballarat Health Services (Aged Persons Mental Health Service) who took the lead role for content and training delivery
- HACC Program, Grampians Region



# Welcome to the Grampians Region



Three key catchments:

- Central Highlands
- Grampians Pyrenees
- Wimmera

Size: 48,000km<sup>2</sup>

Population: 220,000  
(26,000 HACC eligible)

- Approximately 1,500 HACC team members
- Seventeen designated HACC Assessment Services





# Goals of the Project

Early recognition and intervention for clients with possible mental health issues by:

- Increasing the capacity of HACC staff to identify and respond effectively to clients
- Increasing the knowledge of HACC staff regarding referral pathways
- Educating HACC staff on services provided by public mental health services and the Dementia Behaviour Management Advisory Service (DBMAS)



# Desired Outcomes

- To systematically improve the mental health competency of a key workforce in the community
- To increase the confidence of HACCC staff to ask clients about their mental health
- Increased knowledge of mental health and mental illness
- Increased knowledge regarding local mental health services and DBMAS



# Desired Outcomes

- To improve relationships between agencies
- To promote client shared care
- To reduce unrealistic expectations of the role of mental health services
- To demystify mental illness, reduce stigma and promote positive mental health messages



## The Training provided in all 3 phases:

- What is mental health?
- Mental health as a continuum
- High prevalence disorders
- Low prevalence disorders
- Referral pathways
- Importance of early intervention
- Promotion of a partnership approach to service delivery



# Stages of the Project

- **Phase One:** Living at Home assessors
- **Phase Two:** Community Support Workers
- **Phase Three:** All HACC staff – online learning





# The Project –Phase One

## Chosen Strategy for Change in Phase One

- The Kessler Distress Scale (K-10) is a ten item screen for general psychological distress, developed by Prof Kessler (Harvard Uni) in 1992
- The K-10 was used to engage participants and improve their knowledge and understanding of mental health issues and appropriate referral pathways

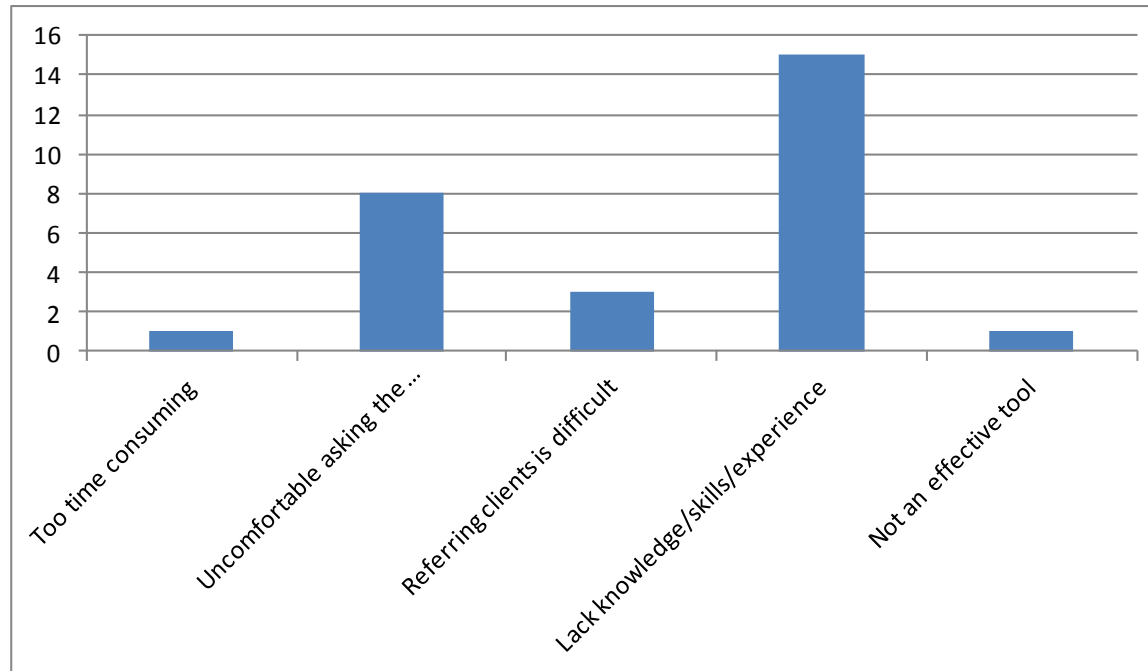


## Why was the K-10 scale a focus?

- General Practitioners are familiar with this tool
- It is an evidence based measure of psychological distress
- It is not a diagnostic tool but a screen that is useful to monitor nonspecific psychological stress over time
- It was part of the Victorian Service Coordination Tools Template (SCTT) although it was not frequently used



## Why was the K-10 not well used?



- The form was not available in stand-alone format to provide to clients to complete - it was nested within the SCTT tool.
- Staff were unaware that the K-10 is a **self-report** scale

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Grampians Region  
HACC Assessment Services



<b>The Kessler Scale (K10) Worksheet</b>	<b>All of the time</b>	<b>Most of the time</b>	<b>Some of the time</b>	<b>A little of the time</b>	<b>None of the time</b>
<b>Please tick the answer that is best for you:</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
1. In the past 4 weeks, about how often did you feel tired out for no good reason?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. In the past 4 weeks, about how often did you feel nervous?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. In the past 4 weeks, about how often did you feel so nervous that nothing could calm you down?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. In the past 4 weeks, about how often did you feel hopeless?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. In the past 4 weeks, about how often did you feel restless or fidgety?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. In the past 4 weeks, about how often did you feel so restless you could not sit still?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. In the past 4 weeks, about how often did you feel depressed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. In the past 4 weeks, about how often did you feel everything was an effort?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. In the past 4 weeks, about how often did you feel so sad that nothing could cheer you up?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. In the past 4 weeks, about how often did you feel worthless?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Client Name:..... Client DOB:..... Total K10 Score:.....

Assessor Name:..... Date:.....

Contact Number:..... Organisation:.....

Comments:.....

Save to file

The opportunity to practice administering the K-10 using a case example



# Getting in Early: A Multi-Phase Approach to Community Engagement and Mental Health Training

## K10 Prompt Sheet

This prompt sheet is to support you when the client fills out the K10. It is not a definitive question and answer list for all clients and all situations.



<p><b>1. TIRED OUT FOR NO GOOD REASON</b></p>	<ul style="list-style-type: none"> <li>• How long have you felt like this?</li> <li>• Are you sleeping well?</li> <li>• Are you in pain?</li> <li>• Have you seen your GP about this?</li> </ul>
<p><b>2. FEEL NERVOUS</b></p>	<ul style="list-style-type: none"> <li>• Are you more nervous than usual?</li> <li>• How long has this been going on?</li> </ul>
<p><b>3. SO NERVOUS NOTHING COULD CALM YOU DOWN</b></p>	<ul style="list-style-type: none"> <li>• Do you feel out of control?</li> <li>• Can you distract yourself?</li> </ul>
<p><b>4. HOPELESS</b></p>	<ul style="list-style-type: none"> <li>• Do you have plans for the future?</li> <li>• Do you have things to look forward to?</li> <li>• Are you satisfied with your life?</li> <li>• Do you feel hopeful your situation will change?</li> </ul>
<p><b>5. RESTLESS OR FIDGETY</b></p>	<ul style="list-style-type: none"> <li>• Do you find it difficult to relax or settle down?</li> <li>• Do you feel uncomfortable in your own skin?</li> </ul>





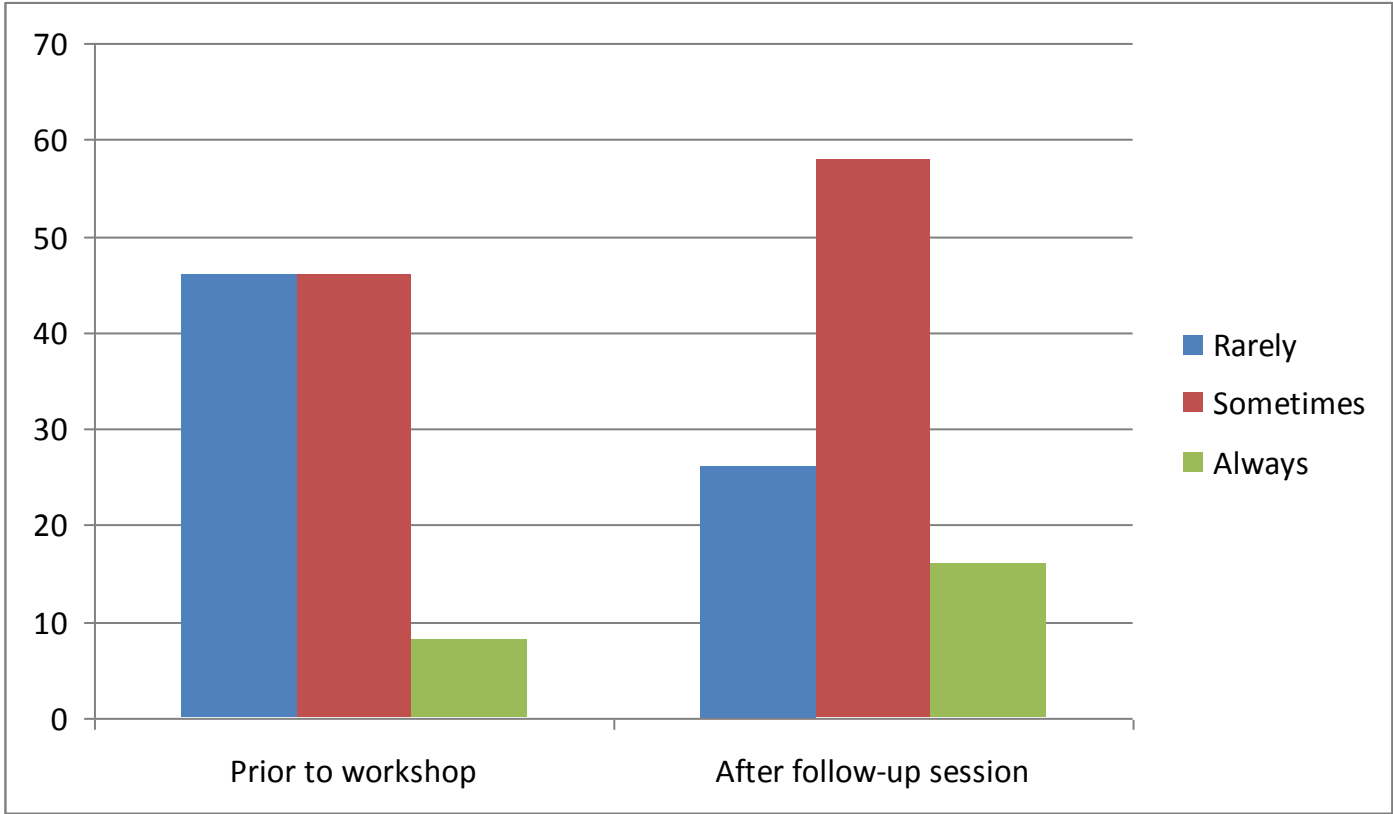
## Results – Phase One

- Over 80% of Assessors reported using the K-10 more frequently after completing the training
- Significant and sustained improvements in use of the K-10 by HACC Assessors

# Getting in Early: A Multi-Phase Approach to Community Engagement and Mental Health Training



In the past month how often has the K-10 been part of your assessment of a client?







## Results – Phase One

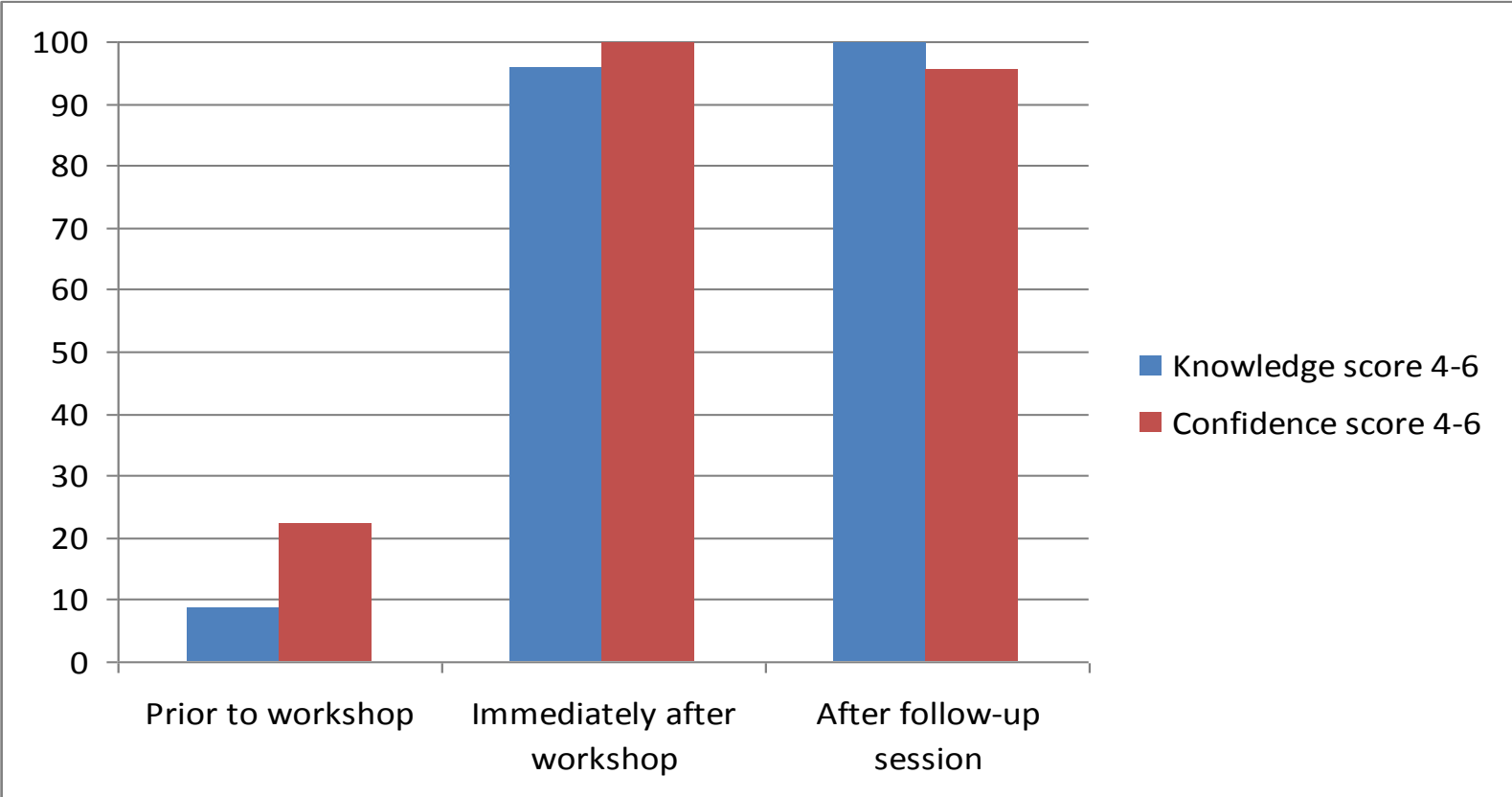
The post-training data was collected four weeks after initial training, demonstrating sustained change to practice:

- Significant improvement in self-reported knowledge about and confidence in using the K-10
- Over 90% reported feeling both knowledgeable and confident
- Anecdotally, we know that use of the K10 has continued amongst this group

# Getting in Early: A Multi-Phase Approach to Community Engagement and Mental Health Training



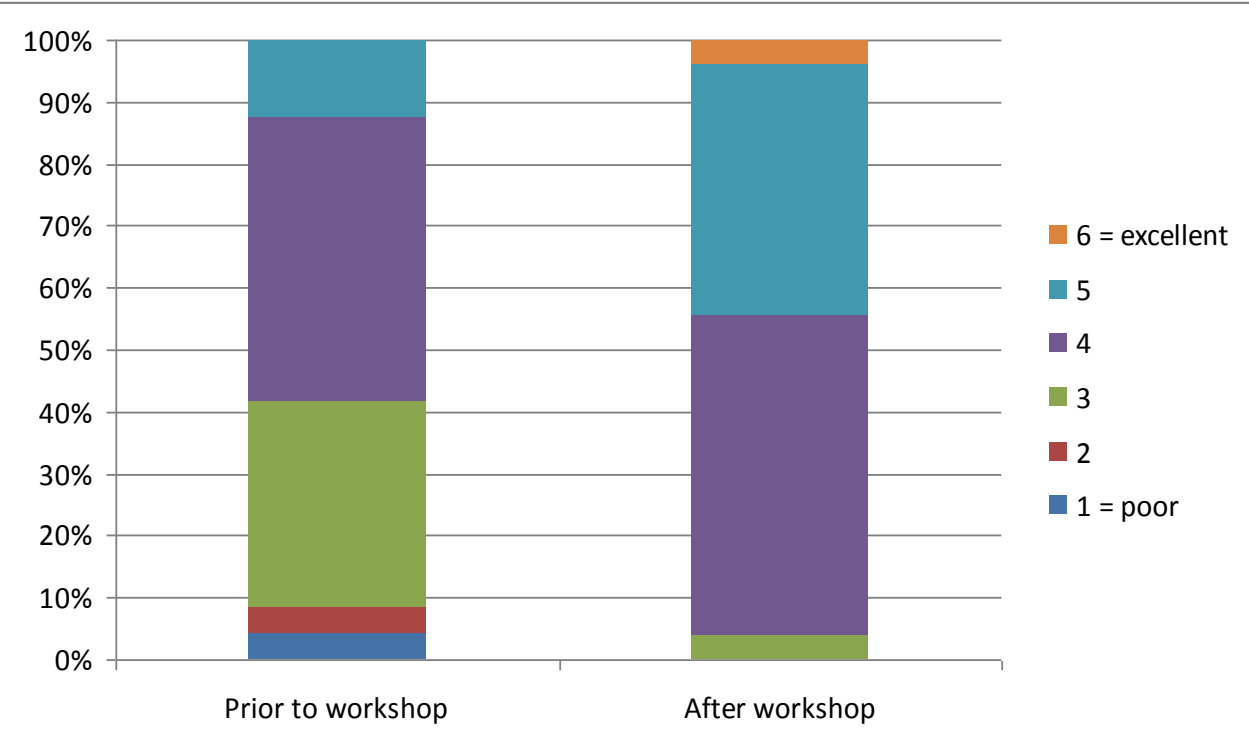
## How would you describe your knowledge and level of confidence regarding the K-10?



# Getting in Early: A Multi-Phase Approach to Community Engagement and Mental Health Training



## How would you describe your knowledge regarding mental health and mental illness?



Participants clearly identified that their knowledge of mental health and mental illness had improved following the training.





## Phase One: a summary...

The training was a success –

- The issue of under use of the K-10 and understanding of barriers to its use were addressed
- Indications of a sustained improvement in practice
- Participants rated training as interesting and pertinent
- Increased knowledge and confidence
- Improved relationships between services



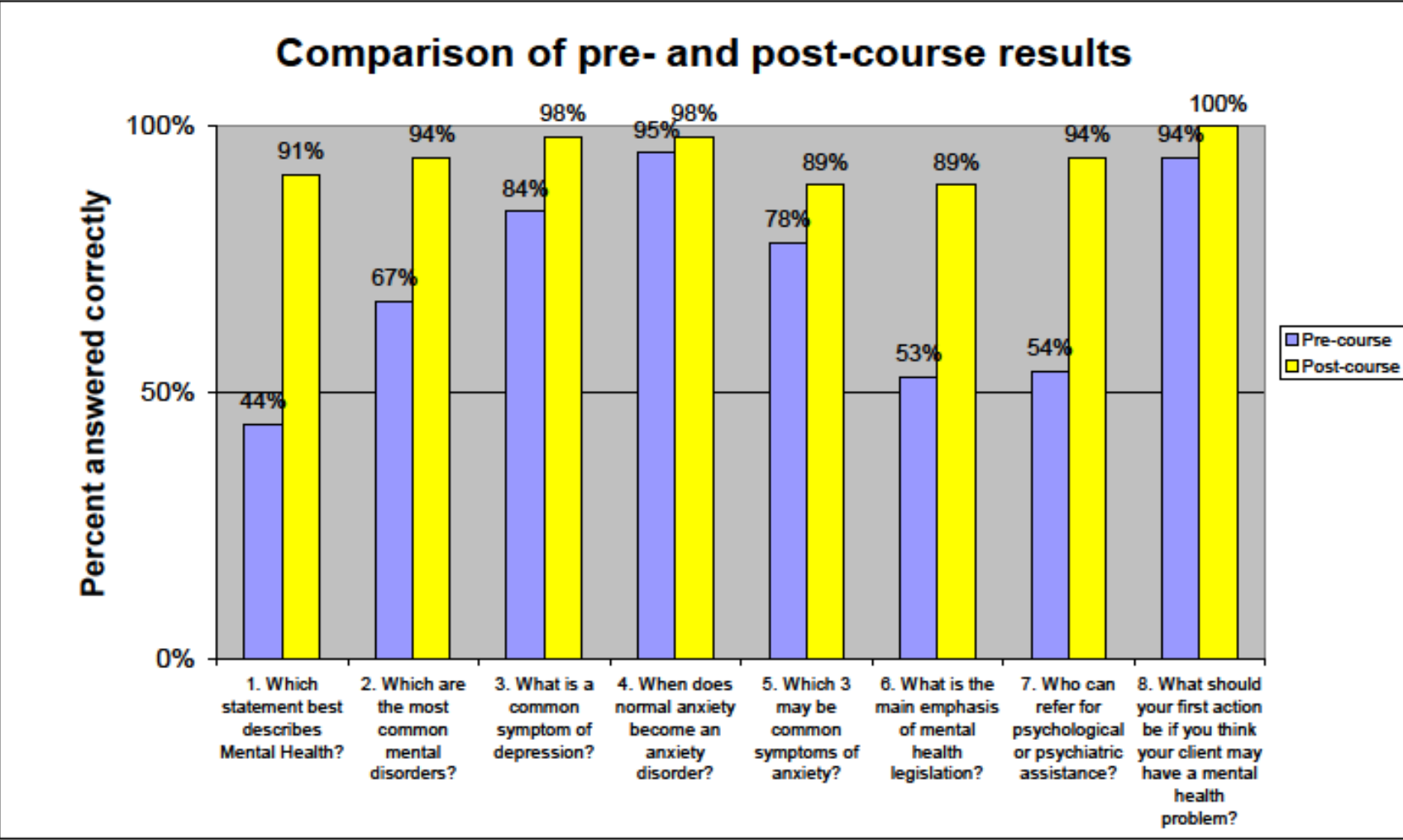
## The Project – Phase Two

Support was gained from all stakeholders to develop Phase Two of the project:

- Face to Face training would now extend to HACC community support workers
- Delivery at 7 locations around the region (approx. 100 participants in total)
- The aim was to target as many staff as possible

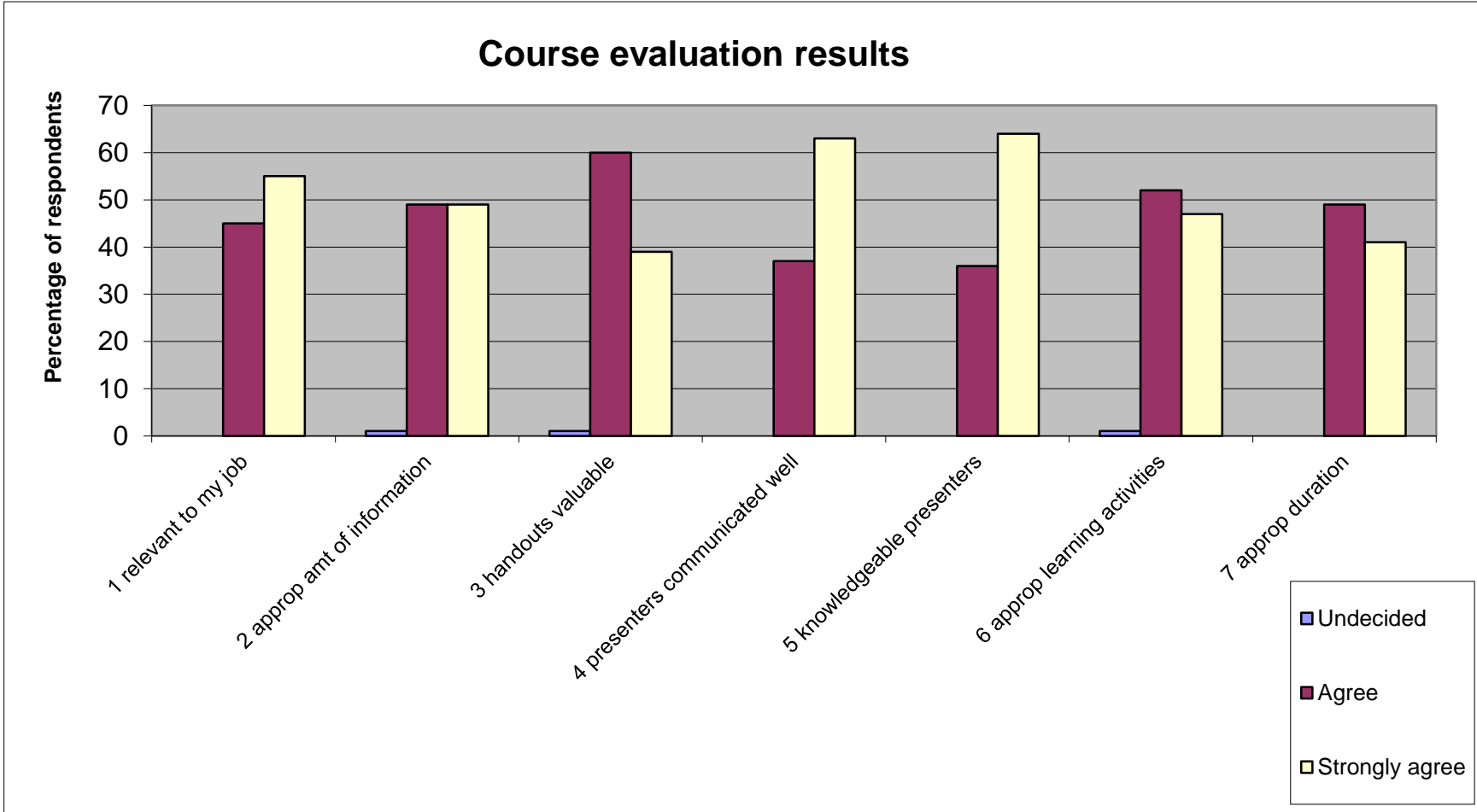


# The Results – Phase Two





# The Results – Phase Two





## The Results – Phase Two

- Comments included:
  - ‘Mental health is not always negative – there is a lot of help out there’
  - ‘Mental health does not always mean a mental illness – it’s about emotional wellbeing’
- Things staff intend to change:
  - ‘Taking more time with a client when things don’t seem right’
  - ‘Be more observant – report signs and symptoms’





## Phase Two: a summary...

The training was a success –

- The myths surrounding mental health and mental illness were addressed
- Mental health literacy was improved
- Participants rated training as interesting and pertinent
- Increased knowledge and confidence in observing and documenting mental health of clients



## The Project –Phase Three

- An online learning unit has been developed which will be available to about 1500 HACCC staff in the region
- This is based on the content from the classroom-based sessions
- The online unit was trialled recently with a group of community support workers and it due for its official launch in November



## Success against desired outcomes:

- ✓ improve relationships between agencies
- ✓ promote client shared care
- ✓ reduce unrealistic expectations of the role of mental health services
- ✓ increase confidence and use of the K-10 by HACCC assessors
- ✓ demystify mental illness, reduce stigma and promote positive mental health messages
- ✓ increase the confidence of HACCC staff to ask clients about their mental health
- ✓ increase knowledge of mental health and mental illness
- ✓ increase knowledge regarding local mental health services and DBMAS



## For further information on the K-10

Kessler RC, Barker PR, Colpe LJ, Epstein JF, Gfroerer JC, Hiripi E, et al. Screening for serious mental illness in the general population. *Arch Gen Psychiatry*. 2003 Feb;60(2):184-9.

Andrew G & Slade T. Interpreting scores on the Kessler Psychological Distress Scale. *Australian and New Zealand Journal of Public Health* 2001. 25(6): 494-497. Clinical Research Unit for Anxiety Disorders (CRUFAD) [www.crufad.com](http://www.crufad.com)



# Thank you

If you would like any more information on the material presented today please contact:

Michelle Cowie Scott

Dementia Behaviour Consultant (DBMAS)

Ballarat Health Services

[michelleco@bhs.org.au](mailto:michelleco@bhs.org.au)