

Clinical Applications Unit

Applying research to improve care coordination

Winter 2009

From the Director

As the Deliberate Self Harm Project draws to a close, Gayle Corbould (right) will be leaving CAU at the end of August. Gayle's contribution to the Unit and more generally to health promotion and suicide prevention has been exemplary, and the findings of the project have already led to changes being made in the way hospitals admit and process people who present with deliberate self-harm.

Gayle's new position will be as Senior Research Officer with the Ministerial Council on Suicide Prevention (MSCP) working out of the Telethon Institute for Child Health Research. We hope that she will continue to network with CAU and build on her excellent achievements here (see overleaf). In addition to these outcomes, the project has also generated a change to PSOLIS, the mental health clinical information system used to enter admissions data, and the 2009 Mental Health Monitoring Program, a collaboration between NMAMHS and the Coroner's Office to review mental health deaths in Western Australia.

We were all very pleased with the recent CAU presentation at the Australian College of Mental Health Nurses, Inc, Western Australian Winter Sunshine Symposium. CAU staff presented as a group, and the feedback obtained from practitioners has been very helpful in refining the direction of our different projects.

CAU is always ready to hear proposals from agencies who are interested in developing coordinated care packages for mental health service delivery. The criteria for our projects is available at: http://intranet.health.wa.gov.au/ccrn/home/cau_info.cfm

Dr Daniel Rock

Winter Sunshine Symposium, Technology Park, 13-14 July

The Australian College of Mental Health Nurses, Inc's Western Australian branch recently hosted a Winter Sunshine Symposium at Technology Park, Curtin University, Bentley. Organised by Tim Rolfe, CAU's Carole Harrison and a hard-working support team, the Symposium proved to be an innovative 2 days, featuring keynote speakers, workshops, presentations and posters, highlighting 'today's challenges, tomorrow's solutions'.

This was an ideal venue in which to showcase the work of CAU as a whole. Gayle Corbould, Yvonne Hauck, Deb Faulkner and Carole Harrison (top to bottom, right) and all presented on their projects. The College is producing on-line published proceedings from the symposium, and the CAU team have submitted their presentations for publication.

As a finale, the College hosted a not-very-serious debate on the topic: 'Resolved: that mental health nurses should provide a personal good example of healthy lifestyles'. CAU's Carole Harrison was part of the victorious side—arguing the negative!



Deliberate Self Harm Project: the outcomes

Target group:

- ◆ deliberate self-harm/suicide attempt presenters who are discharged directly from the Emergency Department
- ◆ aged between 18 and 65 years
- ◆ not attached to a Community Mental Health Clinic or a private psychiatrist
- ◆ resident in postcodes which are covered by the GP division

Aim: to develop a service which will provide:

- ◆ post-discharge care which **assertively** follows up clients
- ◆ **direct contact** by interview, not just telephone contact
- ◆ **linkage** between the Emergency Department and General Practice (GP). Information on patient's presentation and treatment provided to the GP
- ◆ enhanced **resilience** through psychosocial interventions working with the patient's stressors
- ◆ **liaison with the GP** in developing a mental health care plan.
- ◆ assistance in accessing **longer-term** ongoing counselling, if indicated
- ◆ **coordinated care**, including referral to relevant community-based specialist services, eg. alcohol and drug

The ALIVE (Active Life Enhancing Initiative) Service commenced in February 2009 in conjunction with Perth Primary Care Network. The ALIVE coordinator attends SCGH, ED and speaks with the mental health team, and clients in the target group are referred to the ALIVE service.

ALIVE offers:

- ◆ **immediate** contact and ongoing follow-up
- ◆ **flexibility** of community-based interview locations
- ◆ extensive experience **working with GPs** on mental health care
- ◆ extensive **community-based** referral options
- ◆ **four** mental health professionals, psychologists and social workers
- ◆ a service **free of charge**

Service Development:

- ◆ From February to June 2009, the ALIVE service has been referred 49 patients from the ED
- ◆ Average contact with each client is three interviews
- ◆ Use of outcome measures show significant positive shifts for clients
- ◆ 99% of clients report they received the type of service they wanted
- ◆ 88% of clients rated the ALIVE service as 'excellent'
- ◆ 94% of clients reported that the help they had received had helped them deal more effectively with their problems
- ◆ A memorandum of understanding is being developed between PPCN and SCGH: the ALIVE service will continue to service patients leaving the ED

Collaborative care: partners in the service development -

- ◆ Perth Primary Care Network
- ◆ Sir Charles Gairdner Hospital, ED
- ◆ Clinical Applications Unit
- ◆ Mental Health Division, (NMAHS MH)
- ◆ National Department of Health and Ageing (ATAPS)
- ◆ National Suicide Prevention Strategy

Clinical Applications Unit

Director: Dr Daniel Rock
Daniel.Rock@health.wa.gov.au

Research Consultant: Professor Yvonne Hauck
Yvonne.Hauck@health.wa.gov.au

Consultant Psychiatrist: Dr Johana Stefan
Johana.Stefan@health.wa.gov.au

Project Officer: Deb Faulkner
Deb.Faulkner@health.wa.gov.au

Senior Research Nurse: Carole A Harrison
Carole.Harrison@health.wa.gov.au

Research Psychiatrist: tba

