

TARANAKI DHB MENTAL HEALTH AND ADDICTIONS CO-EXISTING PROBLEMS ACTION PLAN

Goal 1: Client Centred – a coherent and comprehensive understanding of the needs of tangata whaiora, whanau and families					
<i>Objective</i>	<i>Action</i>	<i>KPI</i>	<i>Responsibility</i>	<i>Completion Time frame</i>	<i>Progress Made</i>
Documented Client Pathway from primary through to tertiary which is reflective of Whanau Ora is client centred and has a recovery focus.	<ul style="list-style-type: none"> Development of agreed integrated pathway & policies and procedures. Development of Evaluation framework including: qualitative analysis; PRIMHD data, case-load reporting and audits. 	<ul style="list-style-type: none"> Linkages to existing and future projects e.g. MH&A Adult Continuum Project; CAHMS and Maternal Phase III Implementation; Provider Arm Acute Services review; Whanau Ora Service Development and pathways completed Agreed policies and procedures signed off by TLAG. 	<ul style="list-style-type: none"> Planning & Funding, Service Leaders and Managers. 	<ul style="list-style-type: none"> 2011-12 	To be raised at CGB meetings. Pathways still to be developed

Goal 2: Service Development – services need to be responsive to CEP and to work towards being CEP capable

<i>Objective</i>	<i>Action</i>	<i>KPI</i>	<i>Responsibility</i>	<i>Completion Time frame</i>	<i>Progress Made</i>
Integration of Mental Health and Addictions Services and any door is the right door.	<ul style="list-style-type: none"> • Cross Sector Service Level Agreements are developed. • Development of Integrated Health Teams. • Explicit link through the Primary / Secondary / NGO Mental Health and Addictions Demonstration Site Project to ensure primary sector CEP education and training. 	<ul style="list-style-type: none"> • Qualitative Analysis • Service Effectiveness from a clients perspective, service continuum (clinical), and organisational. • Shared electronic files • Increase in co-existing diagnosis. • Enhanced Practitioner resources are in place. 	<ul style="list-style-type: none"> • P&F, Service Leaders and Managers 	2011-2012	Electroni file sharing has been discussed at Better Sooner More Convenient meetings. IT systems do not support this so has been raised with IT. Long term project
Review of Specialist Dual Diagnosis FTE's	<ul style="list-style-type: none"> • Review current roles 	<ul style="list-style-type: none"> • Enhanced Practitioner resources are in place. 	<ul style="list-style-type: none"> • P&F 	2011	Current CEP role at AOD is under review. Plan to recruit into "permanently" by Dec 2011

Provider Arm Acute Services review has resulted in increased dialogue between teams around integration of A&D counsellors into MH Community MDT for specialist support of A&D issues.

Development of documents to support CEP assessments- currently in draft for feedback from teams

Review of Specialist Dual Diagnosis position in A&D currently in progress-

Ongoing provision of intervention education as primary/public health initiatives.

Goal 3. Integrated Systems of care –systems are to acknowledge and incorporate CEP approaches

<i>Objective</i>	<i>Action</i>	<i>KPI</i>	<i>Responsibility</i>	<i>Completion Time Frame</i>	<i>Progress Made</i>
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Goal 3. Integrated Systems of care –systems are to acknowledge and incorporate CEP approaches

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Services Collaborate	<ul style="list-style-type: none"> • Commitment at leadership and clinical governance level to lead collaboration. • Review effectiveness of 'other' established and successful collaborations. Transferrable learning's. 	<ul style="list-style-type: none"> • Effectiveness of leadership in other sector initiatives / projects /service development work in focusing on CEP. 	<ul style="list-style-type: none"> • P&F, Service Leaders and Managers 	2011 ongoing	Working relationships with NGO sector are strong within Taranaki region and any projects will be discussed at Clinical Governance Board meetings, and reported on by Clinical Director and Service Manager at regional meetings

Designated service champions to support teams.
 Provision of inter sector Clinical Supervision to support enhance CEP development

Goal 4: Workforce Development – a highly skilled workforce that is CEP responsive and effective

<i>Objective</i>	<i>Action</i>	<i>KPI</i>	<i>Responsibility</i>	<i>Completion Time Frame</i>	<i>Progress Made</i>
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Goal 4: Workforce Development – a highly skilled workforce that is CEP responsive and effective

<i>Objective</i>	<i>Action</i>	<i>KPI</i>	<i>Responsibility</i>	<i>Completion Time Frame</i>	<i>Progress Made</i>
<p>Staff across the sector are trained & supported to be CEP capable.</p>	<ul style="list-style-type: none"> • Stock-take of current workforce skills base. • Identify the training resources, nationally regionally and locally. • Sharing of knowledge across the sector e.g. supervision and case-management. • Long-term workforce development plan for upskilling and training of staff. • Identify future opportunities for CEP roll-out and training. 	<ul style="list-style-type: none"> • Identify champions in each part of the sector. • By 2015 75% of staff are CEP capable. • Access to training is inclusive of the whole sector. 	<ul style="list-style-type: none"> • P&F, Service Leaders and Managers • Midland WFC 	<p>Ongoing</p>	<p>-Midland Region Workforce Strategic plan 2011-15 aligned with national and regional training. Coordination and delivery of national/regional training at a local level, or support to attend.</p> <p>-As part of the regional delivery of CEP:Case Formulation workshops Taranaki received 3 workshops. A total of 72 mental health and addiction staff (NGO & Provider arm) attended the training, with 38% from NGO and 65% from provider arm. Workshop supported by TDH champion.</p> <p>-All regional training (TCF phase I&II, Working with whanau, CEP) has been inclusive of the whole sector</p> <p>-Dissemination of scholarship and leadership training to develop and 4 upskill staff.</p>

