



Quarterly Report – August/October 2015

EMHSCA

The Eastern Mental Health Alliance began between Eastern Health Mental Health Services and Eastern Metropolitan Region (EMR) Community Mental Health Support Services in 2007 and gradually expanded into its current form as the EMHSCA to include Alcohol and other drug services, Homelessness and Housing Services, Primary Health services, Australian Government Department of Human Services, RDNS, Primary Care Partnerships and Inner East and Eastern Melbourne Medicare locals. More recently Aboriginal Services, Family Violence Services, Connect 4 Health, Inspiro and Services Connect have joined. Consumer and Carer representatives are now attending EMHSCA meetings.

EMHSCA's Vision: To ensure that people who have mental health and co occurring concerns have access to responsive, appropriate and collaborative services to assist with the multiple facets of their individual recovery journey.

Purpose: The EMHSCA is creating opportunities to work strategically across the Eastern Metropolitan Region of Melbourne with multi-sectoral partners.

Partnership: A Memorandum of Understanding exists between 18 service members of the EMHSCA.

The Work: EMHSCA currently oversee the work of the following sub committees

- o Workforce Development
- o Collaborative Pathways
- o Strategic Planning

The EMR Dual Diagnosis Response groups also report to the EMHSCA as the objectives of the Victorian Dual Diagnosis Initiative (VDDI) fit neatly with the objectives of EMHSCA. The following groups make up the EMR Dual Diagnosis Response

- o Dual Diagnosis Working Group (DD WG)
- o Dual Diagnosis Consumer and Carer Advisory Council (DD CCAC)
- o Dual Diagnosis Linkage meetings (Adult and Youth)



Quarterly Report – August/October 2015

Preamble

As I provide this report I am excited about the local developments around the influence of people with lived experience of mental health and/or substance use issues on our services. This quarter has involved a number of peer focussed activities and initiatives. Our future appears to involve greater peer participation in service provision. EMHSCA is responding to the dual reforms and also positioning itself to be ready for NDIS as it aims to strengthen peer participation across the EMR.

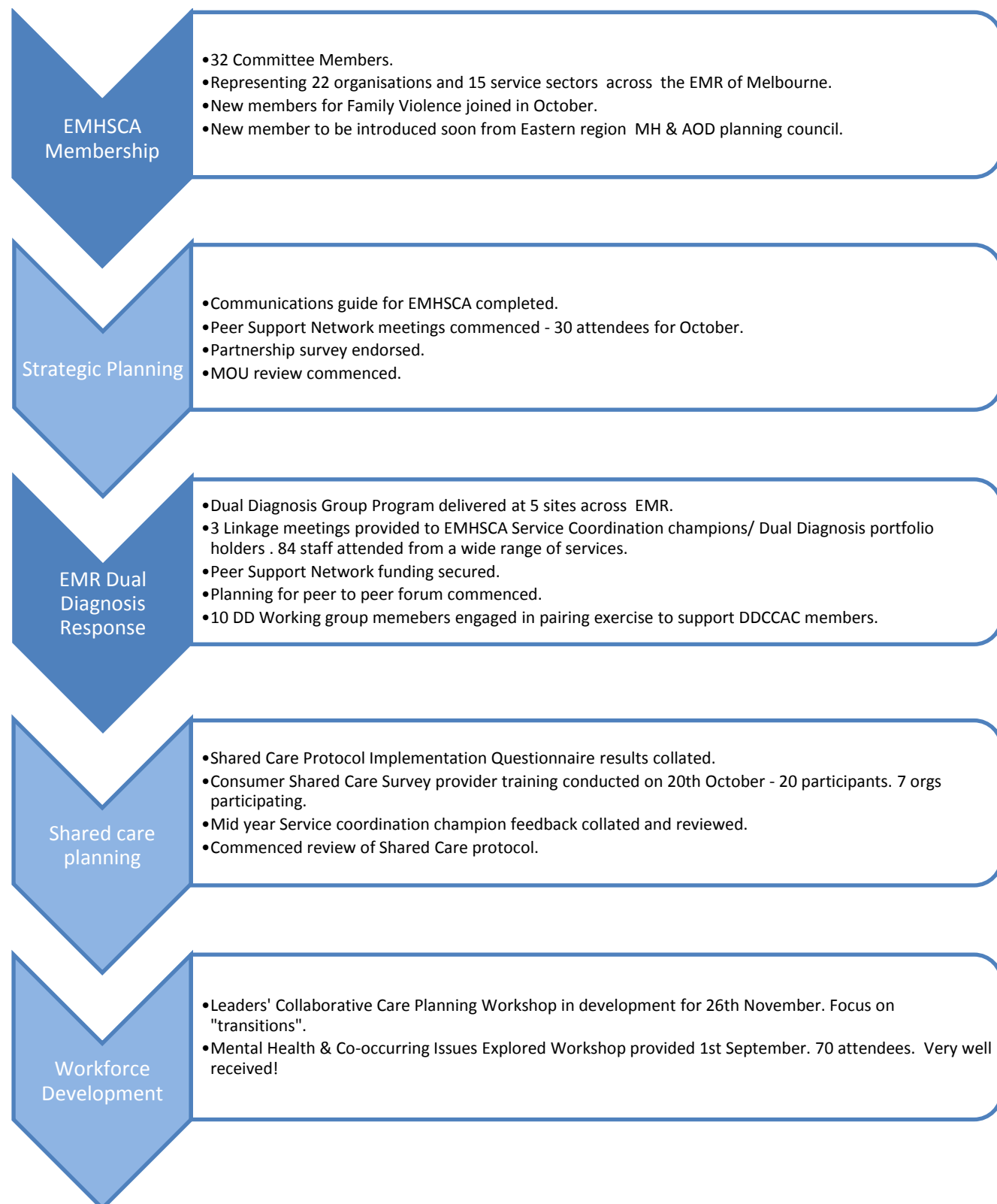
Highlights

- Consumer Shared Care Survey guide completed and provider training conducted – 20th October 2015.
- Mental Health & Co-occurring Issues Explored event held 1st September 2015 and attracted 70 attendees – Workforce Development sub-committee.
- Service Coordination Champions’ 9th meeting provided. Mid-year participant collated and presented to EMHSCA – Oct 2015.
- Leaders’ Collaborative Care Planning Workshop preparations underway for the 26th November. A focus on “transitions and shared care” will be featured – Workforce Development sub-committee.
- Relationship further developing between EMHSCA and regional Planning Council for AOD and MHCSS –collaborative provision of Consumer Shared Care Survey- October 2015.
- Eastern Peer Support Network project co-ordinator (Paula Kelly) employed and Network Launch held 21st October 2015.
- Dual Diagnosis Working Group (DD WG) and Dual Diagnosis Consumer & Carer Advisory Council (DD CCAC) mentoring relationships commenced, Values statement and Code of conduct developed – August 2015.
- Planning for new peer to peer forum underway with DD CCAC and DD WG. Expanded to include service providers talking about how they work with peers – Sept 2015.
- Strategic Planning Sub-committee (SP SC) finalised Communications guide, and Partnership survey – October 2015.



Quarterly Report – August/October 2015

Analysis





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Commenced/ actions required/target dates

Collaborative Pathways Sub Committee

- Support Shared Care Protocol Implementation at EMHSCA services – ongoing.
- Review Shared Care Protocol – Provide recommendations to EMHSCA committee December 2015.
- Support development and implementation of consumer Shared care survey –2015 for commencement in October.
- Support EMHSCA services to embed Shared Care audit – complete by October 2015.
- Support establishment of Service Coordination Champion role in the EMR – ongoing.
- Support development of Peer Support Network- September 2015 – June 2016.

Strategic Planning Sub Committee

- Development and implementation of Partnership survey – June 2015.
- Development and implementation of EMHSCA regional staff retention strategy – Delayed due to time limitations in 2015.
- Review and revise EMHSCA MOU for resigning Feb 2016 – Draft to be provided to EMHSA December 2015.

Workforce Development Sub Committee

- Provide and evaluate Leaders' CCPW – 26th November 2015.
- Develop and provide Annual Collaborative Care Planning Workshop – March 2015.

Future Directions/opportunities

- Promote EMHSCA model via Complex Needs conference presentation – November 2015.
- Prepare the region for introduction of NDIS as suitable information becomes available.
- Provide opportunity in EMHSCA meetings for members to raise service coordination issues.
- Highlight current and existing partnerships and collaborative initiatives of EMHSCA member organisations.
- Seek ongoing funding for EMHSCA project officer.
- Collect data as a step towards a formal evaluation of EMHSCA.