



Creating Partnerships- Promoting Change
Enhancing mental health care in Logan Beaudesert

Who are we?

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The G.P. Integration Program

Overview

- Background - Logan Beaudesert Health Coalition/GP Integration Program
- The issue – why change required?
- Approach taken/model developed
- Linking the model with the theory of partnerships
- Learnings

Background 1

The Logan Beaudesert Health Coalition

- Health Coalition arose in response to the current change agenda within Queensland Health
- Voluntary partnership arrangement with an holistic approach:
- Promote & protect health of the local population
 - Prevent & manage chronic disease
 - Works with private agencies, NGO sectors, Government agencies and the community
- Oversees 6 Programs
- Based on mutual respect, shared responsibility, joint resource investment with a perceived mutual benefit for all involved



Background -2

GP Integration Program

Purpose:

Improve health service delivery across the Logan Beaudesert area by developing innovative models that effect system change within the primary care sector and enhance the continuum of care.

The issue -1

The Environment

- Management of mental health patients in primary care rapidly expanding
- 75% of all mental health contacts occur in GP surgeries
- Varying levels of GP skills' and interest
- Time constraints
- Remuneration issues

The Issue -2

Support???

- Professional cultural differences
- Unclear referral pathways
- Limited specialist support
- Limited knowledge by General Practice of support agencies
- Lack of co-ordination/shared care processes

The Change Required

- ❖ A critical factor in the quality of care provided to these patients is to ensure effective linkages between public, private, primary care and specialist services, and have shared care successfully coordinated.

Approach taken

- Canvassed the views of GPs
- Discussions held with MHS
- Coincided with new service
 - “green fields” approach
- Enabled project manager to visit GPs impacted by new service
 - Discussed issues
- Facilitated a partnership approach

The Model

- District Service delivered from General Practice
- Placement of Psychiatric Registrar in self-selected surgeries
- Role to assist GPs in assessment and treatment
- See patients referred by GPs from that surgery

Linking the Model with the theory of partnerships

1) Synergy

Bringing together stakeholders to develop new ways of improving linkages and promoting continuity of care

Linking the Model with the theory of partnerships

2) Building positive relationships

- GP/specialist roles recognised
- Developing culture of co-operation
 - Team based care
 - Corridor chats
 - Prompt patient feedback

Linking the Model with the theory of partnerships

3) Increasing Capacity of General Practice

- Access to specialist support
- Increase in GP knowledge base
- Increased confidence
- Shared resources

Learnings 1

Enablers

- Recognition of a problem
 - By all parties
- Willingness to try something new
 - Concept of model agreed
- Funding available
 - ESTP
- New Service

Learnings 2

Barriers

- Registrar Training Requirements
- Different expectations of participants and stakeholders
- Staff Changes
 - Loss of historical knowledge

Learnings 3

What Worked

- Improved Access
- Instant Feedback
- Access to Information
 - Advice
 - Services
- Increased Confidence
 - More “In House”

Learnings 4

What would we do differently

- Slower roll out
 - Concerned project would lose momentum
- Clearly Defined Roles/Responsibilities
 - All parties
 - Manage expectations
- Establish Steering Committee
 - GPs
 - Mental Health
 - Divisional
 - GP Liaison Program

Learnings 4 cont

Doing things differently

- Orientation to General Practice
 - Understanding of foreign environment
 - Part of General Practice team
- Requirement for “down time”
 - GP/Registrar interaction
 - Allows time for education/case conferencing
 - Facilitates relationship building

Conclusion

- Model with a lot of potential
- Needs “tweaking” prior to any further implementation



Health Coalition

Logan-Beaudesert

*Leaders in Health, Partners in planning
responding to the community*

