

## 'Tackling Mental Health' Drought Initiatives 2006 - 07

### Primary Care Partnership Guidelines - December 2006

#### Introduction

These guidelines are for Primary Care Partnerships (PCPs) in the regions of Hume, Grampians, Loddon Mallee and Gippsland, setting out a range of initiatives. They may also be of value to rural Barwon South West PCPs (not specifically funded for drought) to assist in considering and planning a service response to drought.

'Drought funded' PCPs are being resourced through the 'Tackling Mental Health' initiative to facilitate and support a range of strategies. Fifteen PCPs across 39 rural Local Government Areas (LGAs) have been funded on a non-recurrent basis. Eight of these, covering 15 of the LGAs assessed to be the most significantly affected, will receive \$27,000 per LGA. These PCPs will be referred to as Group A, identified in the table below. For PCPs with LGAs where drought is also having an impact, \$5,000 per LGA will be provided. These PCPs will be referred to as Group B and can be found in the second table. An additional \$3,330 per LGA will be provided to all PCPs (Group A & B) in March 2007 to facilitate delivery of Mental Health First Aid courses. PCP drought funding fits within the broader DHS initiatives of additional drought counselling positions, VicRelief/Foodbank, Wesley Mission Helpline and early years and education support, being mindful that all of this is embedded within the broader program delivery of primary health, early years and community services.

#### 1. Aims

Rural PCPs in drought-affected areas will be funded to:

- Strengthen an integrated service response to the mental health impacts of drought, through a partnership approach that builds on existing drought response structures and processes e.g., local government drought planning (*particular partners include primary health, mental health, family and early childhood services, general practice and local government*)
- Ensure that broader PCP planning and priorities reflect a drought focus
- Support the further development of skills, knowledge and planning skills in health promotion, service coordination, recognition of mental health/stress indicators and improved service access
- Expand PCP capacity for participation/leadership in community needs analysis including recognition of existing social capital, and the identification of practice models that enhance mental health and wellbeing in communities affected by drought.

#### 2. Broad Approach

The PCP role is to engage with current members as well as other relevant organisations and sectors, in order to develop an integrated mental health and well-being drought service response. It is important that all PCP and broader primary health approaches integrate and build upon established drought recovery systems. Where possible, actions are to be built into current PCP capacity-building and priority-setting processes in order to enhance sustainability and integration.

### 3. Funding and Deliverable Summary

All 'drought' deliverables to be reflected within Community Health Plan and CHIPIA reporting

Deliverables	Funding allocation
<i>Group A</i> <ul style="list-style-type: none"> <li>General Health Promotion Capacity Building</li> <li>Service Coordination</li> <li>Drought program linking and dissemination</li> <li>Evaluation/contribution to practice and evidence-base</li> </ul>	\$17,000 per LGA
<i>Group B</i> <ul style="list-style-type: none"> <li>Drought program linking and dissemination</li> </ul>	\$ 5,000 per LGA
<i>Group A</i> <ul style="list-style-type: none"> <li>General practice engagement through divisions of general practice</li> </ul>	\$10,000 per LGA
<i>Group A &amp; B</i> <ul style="list-style-type: none"> <li>Mental Health First Aid Training (Office for Children have contributed \$30,000 to this)</li> </ul>	\$3,330 per LGA (March '07 variation)
<i>Group A</i> <ul style="list-style-type: none"> <li>VicHealth Mental Health Promotion Shortcourse</li> </ul>	VicHealth funded \$ 120,000 One course per PCP catchment One 'Leading the Way' session per region

### 4. Activities and deliverables for Group A Primary Care Partnerships

Targeting Local Government Areas in Exceptional Circumstances with significant drought impacts

PCP	LGA(s)	EO Contact details
Bendigo Loddon PCP	<b>Loddon (A)</b> <i>Greater Bendigo (B)</i>	Kath Johnson – part time convener 5434 4300 <a href="mailto:kathjohnson@bchs.com.au">kathjohnson@bchs.com.au</a>
Campaspe PCP	<b>Campaspe (A)</b>	Emma Brentnall 5484 4489 <a href="mailto:emma.brentnall@campaspepcp.com.au">emma.brentnall@campaspepcp.com.au</a>
Northern Mallee PCP	<b>Mildura (incl SLA of Robinvale) (A)</b>	Christine Dinale 5021 4875 <a href="mailto:nmpcpadmin@schs.com.au">nmpcpadmin@schs.com.au</a>
Southern Mallee PCP	<b>Swan Hill, Gannawarra Buloke (A)</b>	Bronwyn Murray 5032 4479 <a href="mailto:manager@smcp.org">manager@smcp.org</a>
Grampians Pyrenees PCP	<b>Northern Grampians; Pyrenees Ararat (B)</b>	Kate Serrurier 0407 548 553 <a href="mailto:kates@grampianspyreneespcp.org.au">kates@grampianspyreneespcp.org.au</a>
Wimmera PCP	<b>West Wimmera; Hindmarsh; Yarriambiack; Horsham (A)</b>	Mandi Stewart 5362 1223 <a href="mailto:mandi.s@gchc.org.au">mandi.s@gchc.org.au</a>
Goulburn Valley PCP	<b>Moira; Greater Shepparton (A)</b> <i>Strathbogie (B)</i>	Neil Stott 5862 2681 <a href="mailto:gvpcp@gvchs.com.au">gvpcp@gvchs.com.au</a>
Upper Hume PCP	<b>Towong (A)</b> <i>Indigo; Wodonga (B)</i>	Judith Moore (02) 6022 9284 <a href="mailto:jmoore@wodonga.vic.gov.au">jmoore@wodonga.vic.gov.au</a>

#### Group A Primary Care Partnership Deliverables

As part of the Service Funding arrangements, PCPs will be expected to:

**4.1 Build a drought focus** into current partnership, health promotion, service co-ordination and integrated disease management planning as relevant, to be updated in the Community Health Plan and reported on in the CHIPIA.

**4.2 Support and identify health promotion** that enhances community and cross sector engagement in needs identification; priority setting and planning and utilises existing networks/structures and evidence-based practice e.g., Drought Social Recovery Committees, Health Promotion Working Groups.

**4.3 Promote and identify service coordination** that focuses on entry points and referral pathways that enhance relevant mental health responses e.g., Central Victorian Health Alliance model. Consider specialist and primary mental health services; General Practice (GP); Emergency Departments; Emergency Relief organisations; community and neighbourhood 'gatekeepers' (Mental Health First Aid participants, volunteer groups, rural businesses customer contact staff).

**4.4 Enhance knowledge of drought programs across catchments** – PCPs to facilitate the identification and dissemination of the range of current mental health and well-being programs across relevant organisations and community groups including local, state and commonwealth departments relevant to drought. This might include service forums, community and service information building on current and past drought social recovery activities. PCPs would use this to highlight existing programs as well as identify 'gaps'.

**4.5 Convene local training activities** (*see also Workforce Development below*)

- Each PCP to convene and facilitate Mental Health 'First Aid' Course(s).
- Each PCP to locally convene and facilitate participation in separately funded (VicHealth) Mental Health Promotion Short Courses.
- Assist in the convening of drought-adapted 'Leading the Way' sessions for councillors, boards and senior managers in Hume, Loddon Mallee and Grampians (VicHealth facilitated with 1 per region)

#### **4.6 Links with General Practice**

PCPs to support the engagement of general practice in an integrated service response to drought, through a strong partnership with relevant Divisions of General Practice. It is important to focus this around adding value to current strengths, gaps and opportunities. As a minimum, PCPs are required to provide 50% (\$5,000 per LGA) of the GP engagement allocation, to ensure that each division is provided with some capacity to participate. Allocation of the full amount of \$10,000 (per LGA) to GP Divisions is encouraged to support a shared partnership commitment. Below are just some examples/ideas of actions:

- *Division of General Practice staff inclusion in Mental Health promotion courses.*
- *Inclusion of Practice Nurses in Mental Health First Aid courses.*
- *Working group participation in development of mental health entry point / referral.*
- *Participation of GPs in Bouverie Counselling training and regional peer support networks.*
- *Strengthening partnership with Primary Mental Health Teams to support GP links.*
- *GP participation in 'Sale Yard' health assessment and health promotion teams.*

**4.7 Evaluate and document** at least one project/program model in each targeted Group A LGA, using 10% of each PCP's general capacity funding. These evaluations will be used to establish an evidence base on 'what makes a difference' in communities in transition, to inform future planning and program development. DHS centrally and regionally will assist in the coordination and development of evaluation across catchments.

Regional and statewide support and facilitation for evaluation will be provided through the regional and statewide coordination positions.

A shared evaluation approach will focus on reviewing strategies and approaches to determine what might be 'making a difference'. The Health Impact Assessment Report into Drought Social Recovery (Mary Mahoney, Deakin University), the 'Wisdom from Drought' Conference papers and broader research and reviews will provide some baseline information on which to build.

Reporting data and evaluations of drought activities will be collated into an evidence-based resource that will inform ongoing planning and program development for communities experiencing significant stress and change.

## 5. Activities and deliverables for Group B Primary Care Partnerships

Targeting Local Government Areas with serious drought impacts

PCPs	LGAs	PCP EO Contact details
Central Hume PCP	<b>Alpine; Benalla; Mansfield; Wangaratta</b>	Melinda Shepherd 5761 2263 <a href="mailto:centralhumepecp@delititechs.hum.org.au">centralhumepecp@delititechs.hum.org.au</a>
Lower Hume PCP	<b>Mitchell; Murrindindi</b>	Tony Vivien 5793 6330 <a href="mailto:viviant@humehealth.org.au">viviant@humehealth.org.au</a>
Central Health Victorian Alliance	<b>Mt Alexander; Central Goldfields; Macedon Ranges</b>	Lisa Delaney 5472 5333 / 5472 4827 <a href="mailto:ldelaney@netcon.net.au">ldelaney@netcon.net.au</a>
Central Highlands PCP	<b>Ballarat; Golden Plains; Moorabool; Hepburn</b>	Helen Wade 5339 4051 <a href="mailto:helenw@chpcp.org">helenw@chpcp.org</a>
Wellington PCP	<b>Wellington</b>	Jo Cockwill 5143 1600 <a href="mailto:wpcphp@gwhealth.asn.au">wpcphp@gwhealth.asn.au</a>
East Gippsland PCP	<b>East Gippsland</b>	Peter Muldoon 5155 8300 <a href="mailto:peterm@glch.org.au">peterm@glch.org.au</a>
South Coast Health Services Consortium	<b>Bass Coast; South Gippsland</b>	Kirk Warren 5674 3105 <a href="mailto:k.warren@sggp.com.au">k.warren@sggp.com.au</a>
Central West Gippsland PCP	<b>LaTrobe; Baw Baw</b>	Meredith Davey 5171 1457 <a href="mailto:Meredith.davey@lchs.com.au">Meredith.davey@lchs.com.au</a>

### Group B Primary Care Partnership Deliverables

As part of the Service Funding arrangements, PCPs will be expected to:

#### 5.1 Reflection of drought activity within Community Health Plan

**5.2 Enhance knowledge of drought programs across catchments** – PCPs to collate and disseminate the range of current mental health and well-being programs across relevant organizations and community groups including local, state and commonwealth departments relevant to drought. This might include service forums, community and service information building on current and past drought social recovery activities. PCPs would use this to highlight existing programs as well as identify ‘gaps’.

#### 5.3 Convene local training (see also Workforce Development below)

Each PCP to convene and facilitate 1 Mental Health ‘First Aid’ Course per LGA.

## 6. Training

### 6.1 Mental Health ‘First Aid’ Training (Group A & B PCPs)

PCPs to convene and facilitate participation, applying to Primary Health for the funding for each course delivered. It is expected that PCPs will work closely with other relevant programs such as Primary Mental Health Services in developing and delivering courses. This training provides community members with a basic understanding in alerting them to the signs that a client, friend, neighbour or family member may not be coping with a stressful event.

The training is auspiced by ORYGEN Research Centre at the University of Melbourne, Department of Psychiatry. Participants receive a course manual and also a certificate at the completion of the course. Those who have completed the course have been very positive about the knowledge and skills they have acquired.

Participants can include teachers, nurses, child care staff, employment agency staff, personnel staff, service contact staff; bank managers; hairdressers, Country Fire Authority and State Emergency Service members; community leaders; members of the general public and staff of many Commonwealth, State and Local Government Departments.

**Website** <http://www.mhfa.com.au/>

Training is to be run in conjunction with Mental Health Promotion Short courses to allow some joint work as a means of strengthening networks and collaboration i.e., courses held in close proximity on the same day, with a joint session on local networks and planning.

### **6.2 Mental Health Promotion Short-Courses** (Group A PCPs)

This is comprehensive training around integrated health promotion focusing on enhancing mental health. It has a strategic and operational planning focus and is useful for local government, primary and mental health, education practitioners with a role in mental health and well-being and health promotion planning.

Each Group A PCP will have the opportunity to facilitate one short-course for their catchment. The drought adaptation of a 'Leading the Way' type program targeted at senior management, Councillors and Boards of Management to be provided on a regional basis is also being considered. Implementation would be actioned through:

- VicHealth providing course delivery
- PCPs undertaking local planning and facilitation for each of Group A PCP catchments
- Primary focus for Mental Health Promotion Short Course being practitioners/regional advisors in community health, education, early years advisors, local government, sport, the arts, crime prevention and GP Divisions
- Being run in parallel where possible with Mental Health 'First Aid' Courses to provide opportunities for networking and collaboration.

## **7. Department Of Human Services**

### **Central Primary Health Coordination**

A Drought Primary Health Coordinator position has been established within the Partnerships Team of the Primary Health Branch. This role will support and monitor implementation of all components of the DHS response, as identified above, reporting progress to the Emergency Management Branch. This role will also coordinate information-sharing and oversee the development of a practice evidence base relevant to all components.

### **Regional Drought Coordination**

Regional coordination positions will be established in Loddon Mallee, Grampians, Hume and Gippsland regional offices to support work being delivered across the sector, in partnership with the Primary Health Branch centrally.

### **Office for Children Coordination**

A position within Office for Children will support the Family Services counselling components, and work closely with Primary Health in ensuring that that all aspects of the drought response are integrated and complimentary.

### **Primary Health Counselling Coordination**

A coordination role specifically for community health counselling positions & training will be managed within the Community & Women's Health Team.

## **FOR FURTHER INFORMATION CONTACT:**

### **Your Regional DHS Office:**

regular PCP contacts and/or

#### **Grampians**

Tony Lynch Ph. 5333 6680

[tony.lynch@dhs.vic.gov.au](mailto:tony.lynch@dhs.vic.gov.au)

#### **Hume**

Narelle Grantham Ph. 5722 0523

[narelle.grantham@dhs.vic.gov.au](mailto:narelle.grantham@dhs.vic.gov.au)

#### **Loddon Mallee**

Will Trimble Ph. 5434 5519

[will.trimble@dhs.vic.gov.au](mailto:will.trimble@dhs.vic.gov.au)

#### **Gippsland**

Leah Henderson Ph.5177 2690

[leah.henderson@dhs.vic.gov.au](mailto:leah.henderson@dhs.vic.gov.au)

### **Central DHS Office:**

Sally Rose Ph. 9096 8382

State-wide Drought Response Coordinator

Primary Health Branch

[sally.rose@dhs.vic.gov.au](mailto:sally.rose@dhs.vic.gov.au)

Jenk Akyalcin Ph. 9096 7646

Manager, Partnerships Team

Primary Health Branch

[jenk.akyalcin@dhs.vic.gov.au](mailto:jenk.akyalcin@dhs.vic.gov.au)

Sue Edwards Ph 9096 7428/ 0437 090 574

Office for Children

Family Services - Counsellors

[sue.edwards@dhs.vic.gov.au](mailto:sue.edwards@dhs.vic.gov.au)

Sue Hughes

Community Health Counselling

Primary Health Branch

Ph. 9096 6136

[sue.Hughes@dhs.vic.gov.au](mailto:sue.Hughes@dhs.vic.gov.au)

