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Conference Abstract

Working together, working better

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Abstract

1.MHPN is a unique federally-funded initiative targeted at improving interdisciplinary practice and collaborative mental health care in primary health care in communities across Australia.

Improved consumer outcomes, increased workforce efficiency and an enhanced experience of seeking and receiving care can result from improved clinical pathways and better informed referrals that are fostered by collaborative practice.

2.MHPN provides practitioners with two platforms to engage in networking and professional development that directly promote interdisciplinary practice. Platform 1 is a national platform which supports in excess of 400 local practitioner networks to meet voluntarily up to four times a year, 40% of which are in regional, rural and remote communities.

Platform 2 is a national online professional development program which produces live interactive webinars by leading experts to promote interdisciplinary practice.

3.High participation rates are a strong indication that MHPN is meeting a professional development need for primary mental health care practitioners. Proven practitioner response is a strong indicator of the model of engagement that has been developed through MHPN

4.As in Point1. For integrated care to be effective it requires a solid interdisciplinary platform on which effective clinical pathways and effective treatment and care regimes can be developed.

5.Practitioners working in community mental health. Membership primarily reflects the core disciplines of psychologists, GP's, psychiatrists, nurses, social workers and occupational therapists. The public/private mix is influenced by location.

6. Stakeholders include all the key professional colleges and associations, all relevant national peak bodies and key interest specific diagnostic groups.

7.MHPN commenced operations at the beginning of 2009 and commenced the operations of the two platforms in October 2010.

8. The MHPN model can be variously viewed from an interdisciplinary, workforce development, primary care and a mental health perspective. It is targeted, flexible and is based on supporting self directed professional development for time poor practitioners.

9. For the third consecutive year 11,000 practitioners have participated in over 400 networks coordinated by over 550 coordinators. Since October 2010, attendances have grown to 60,000. In 2013-14, the 10 webinar program attracted 15,000 participants who directly participated or downloaded the recording. MHPN has a mailing list of 30,000.

In 2013-14, MHPN enabled over 55,000 hours of recognised continuing professional development that centred on the importance of interdisciplinary practice across Australia.

10. MHPN is still a new addition to the primary care sector. There has been sufficient evidence accumulated over the past three years to indicate support for this unique approach.

11. The model is transferable. MHPN has been commissioned to help strengthen the clinical response to demand that has been generated by the Royal Commission Into Institutional Response to Clinical Abuse. Over

30 specific interest networks have been established at the interface between mental health and chronic disease including diabetes, cancer, and chronic pain. The model could be effective in any of the chronic disease domains.

12. A consolidated analysis of three evaluations [two internal with external expertise] together with MHPN activity data describes the MHPN model and the key features that support sustainability and some demonstrated evidence that attitudes to collaborative care have significantly changed over time.

13. Relationship between interdisciplinary practice and integrated care.

14. lessons learned. Many!

Keywords

interdisciplinary; mental health; primary care

PowerPoint presentation

https://www.conftool.net/integratedcare2014/index.php?page=downloadPaper&form_id=248
