
POSTER ABSTRACT

Technology-enabled service models for quality improvements in Australian mental health care delivery

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Introduction (comprising background and problem statement): New health information technologies (HIT) are being rapidly developed to support the transformation of mental health services. The InnoWell Platform is a configurable and customisable digital tool that assists in assessment, monitoring and management of mental ill health and maintenance of wellbeing. Importantly, the InnoWell Platform is not just installed into a service, rather implementation is informed by participatory design methodologies, including service modelling to understand and map clinical pathways (both pre- and post-implementation), relationships to external mental health and social services, and key performance indicators related to safety and service quality.

Theory/Methods: The InnoWell Platform is now being offered as part of standard clinical care in face-to-face and online mental health services across population groups, including young children and their families, young people, adults (including the veteran community) and older adults. During pre-implementation, at least two service modelling workshops are conducted to discover, evaluate and prototype clinical pathways (intake, assessment, treatment planning, treatment, progress monitoring, exit) which can be assessed against safety and service quality domains (i.e. accessibility, acceptability, workforce competence, efficiency, effectiveness, appropriateness and care continuity). The co-designed service models are updated quarterly to reflect changes related to implementation and impacts on workflows by role (i.e. health professional, service management or administration).

Results: To date, service modelling workshops have been conducted in nine primary youth mental health services, a counselling service for veterans and their families, a helpline for individuals affected by eating disorders and negative body image issues, and a primary health network using 'staged care' principles across the lifespan. To ensure a comprehensive understanding of each service's clinical pathway, participants included those with a lived experience (consumer and/or supportive other), health professionals, service management and administration. Key themes explored included: quality in mental health service provision; current clinical pathway(s) with an emphasis on access and delays in service provision; and, how the InnoWell Platform could enhance care and improve outcome monitoring.

Discussion: New HITs, such as the InnoWell Platform, have the potential to realise significant improvements in Australian mental health service quality. Co-designed service models highlight

potential points of consumer engagement with the Platform and impacts on service workflows to facilitate successful implementation.

Conclusions (comprising key findings): A thorough understanding of a service's clinical pathway is essential to determine at which point(s) the InnoWell Platform is best placed to drive person-centred, collaborative care; improve the efficiency and enhance the effectiveness of care provision; and monitor safety and service quality.

Lessons learned: Iterative review of service models is required to track changes associated with embedding the Platform in the service as well as in response to service-level changes (i.e. revised intake procedures).

Limitations: Currently, limited data is available in the Platform to evaluate safety and service quality indicators as they relate to points in the clinical pathways.

Suggestions for future research: Monitoring changes in the service model in association with real-time metrics collected by the Platform will inform and guide service quality improvement.