



OUR PURPOSE

CMH&AS provide high level specialist stepped care utilising a range of therapeutic options delivered by a multidisciplinary team to support people and their families to recover and live well.

OUR PRIORITIES FOR 2017 TO 2018

Improve people's mental health and wellbeing

- Continue to invest in therapeutic modes and talking therapies for workforce development
- Continue to invest in suicide prevention training as workforce priority
- Explore and scope zero suicide model

Reduce harm caused by alcohol and other drugs

- Develop local alcohol and other drug (AOD) model in line with regional agreement
- Standardised screening across primary, hospital and secondary care
- Undertake OST gazetting. Implement recommendations as required.
- Undertake service development to be able to implement SACAT requirements.

Improve integration across primary/secondary and social sector agencies

- Implement & evaluate network model of care
- Depict model in illustration and written form to demonstrate pathways
- Provide credentialed curriculum of learning across the sector
- Develop consult liaison model
- Strengthen crisis management response

Improve service delivery

- Review and standardise processes such as triage, MDT and discharge
- Develop increased standardised repertoire of stepped care assessment and intervention options
- Revise admission pack and service user/tangata whaiora information
- Develop dashboards for key performance indicators
- Evaluate systematically service user/tangata whaiora family/whanau experience
- Establish audit schedule for process measures
- Establish streamlined communication mechanisms to share information with primary care providers

OVERVIEW OF PROPOSED NETWORK MODEL OF CARE

Aim of revised Model of Care

The aim of this work is to develop and implement a revised model of care for WDHB Specialist CMH&AS; and that this approach will be integrated with primary care and the community and enable the service to be fit for the future.

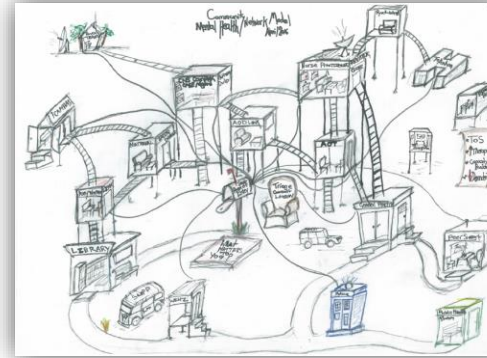
Overall it is envisaged that the implementation of the Network Model will create deep and sustainable change for the service and its partners and most importantly will improve outcomes and experience for service users and their/whanau family.

Proposed model of care

The proposed model incorporates networked principles within a stepped care approach.

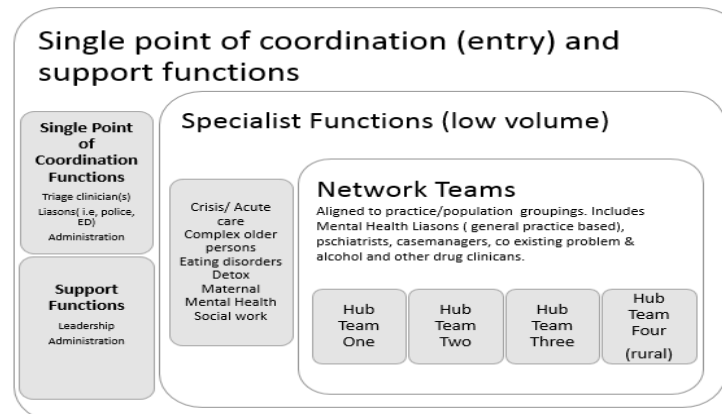
The Network Model of Care is premised around holistic, person/whanau centred care, which will ensure that tangata whaiora have access to, and are matched with the right care at the right time.

The Network Model also increases focus on integration through connected networks which will support smoother access to support and transition between care. A focus of the role of specialist services in providing a mentoring structure, and education opportunities for primary care will be an enabler for developing the skills and capacity of the primary care workforce.



Key elements of Model of care

1. Partnership approach
2. Clearly identified network of providers and support
3. Team structure is an enabler and amplifier of network approach
4. Patient pathway elements reflect principles
5. Workforce capable and proactive
6. Streamlined processes



Principles of the model of care

Person/whanau centred care	<ul style="list-style-type: none"> - Nothing about me without me, and my whanau/family - Whole of person care and support - People are partners in their own care - Trauma informed care - Culturally responsive
Stepped Care	<ul style="list-style-type: none"> - People are matched to the right level of support
Seamless	<ul style="list-style-type: none"> - Care accessed when it is needed - Transitions are planned and smooth
Integrated care; One care plan	<ul style="list-style-type: none"> - Seamless care - Partnership approach with General Practice and other providers involved in care - Physical and mental health needs are addressed
Connected Network	<ul style="list-style-type: none"> - CMH&AS connects to and is a connector in a net of provider and agencies - Committed to fostering meaningful relationships
Adaptable	<ul style="list-style-type: none"> - Adaptable to the needs of individuals - Adaptable to environmental changes
Evidenced Based	<ul style="list-style-type: none"> - Services delivered are evidenced based - Service provider skills are appropriately matched to need of the community
Outcome focussed	<ul style="list-style-type: none"> - Clear goals and knowledge of what success looks like - Committed to learning and improvement

Model of care pathway

