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DEVELOPMENT OF A TRIAL PEER ADVOCACY AND SUPPORT SERVICE

Ann Bates and Vivien Kemp



INTRODUCTION TO HEALTHRIGHT AND DUTY TO CARE



Duty to Care Report: Preventable physical illness in people with mental illness

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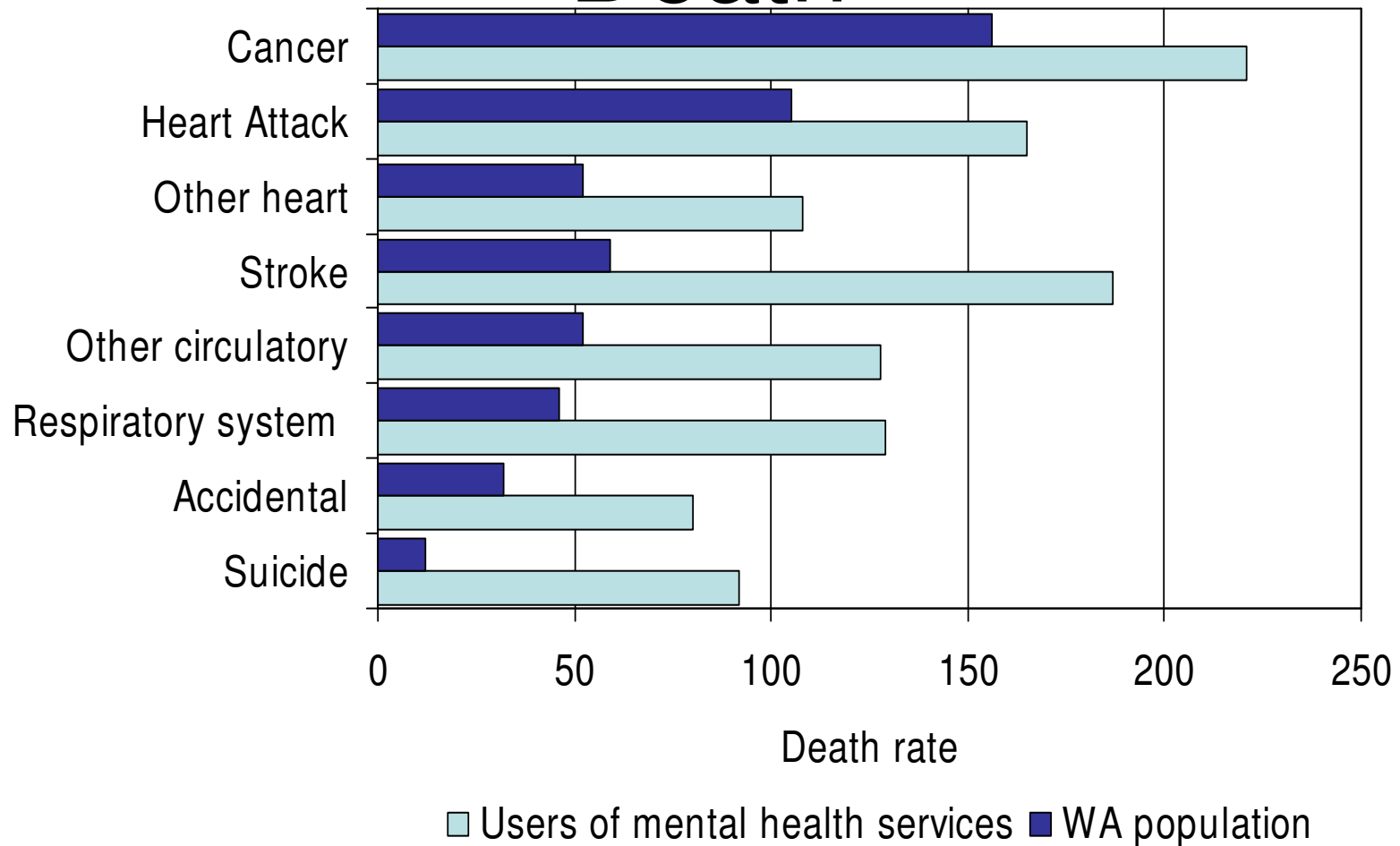
**UWA Centre for Health Services Research
2001**



Duty to Care Research

- The study used the WA Linked Database to examine serious physical illness in people living with mental illness.
- Records for all users of public mental health services in WA were linked with hospital admission records, cancer registrations and death records.
- Data was analysed for 231,311 people who were users of public mental health services in 1966-98 (representing an average of 8% of the population of WA at any one time).

Death Rates – Major Causes of Death





PROJECT OBJECTIVES

To improve the physical health outcomes for people with mental illness through:

- Awareness campaign
- Statewide clinical protocols
- Health promotion campaign
- Recommendations for tertiary education
- Peer support trial
- Involvement of all stakeholders
- Promotion of interagency collaboration and linkages with GPs



PEER ADVOCACY AND SUPPORT SERVICE (PASS) Trial

- **To conduct a trial of the Peer Advocacy and Support Service model to provide practical support for consumers and their carers in making and attending appointments with doctors and other health professionals**

The work of Margaret Cook and Ginger Gordy as members of the HealthRight Advisory Group must be acknowledged



PEER ADVOCACY AND SUPPORT SERVICE (PASS) Trial

My own objectives:

- **To make this sustainable**
- **To do the job professionally – training, selection, resources, payment**
- **To involve the non-government sector**
- **To ensure that physical health needs were met but not to ignore other needs**
- **To involve consumers of mental health services at all stages of the trial**
- **To evaluate the trial**



COLLABORATION

- **Major partner Ruah Community Services**
- **Hills Community Support Group (Rainbow Project)**
- **Perth Primary Care Network Street Doctor Service Midland**
- **Rockingham Kwinana Mental Health Services**
- **Mirrabooka Community Mental Health**
- **Joondalup Community Mental Health**



DEVELOPMENT PROCESS

- **Reference group set up representing all stakeholders**
- **Research component developed/UWA ethics approval obtained – results/ recommendations to be provided to Dept of Health**
- **3 day training program and related resources developed and 23 consumer reps trained in Feb 07 in Perth/Rockingham Kwinana**



DEVELOPMENT PROCESS

- **Recruitment procedure set up and 6 peer supporters selected – 2 in each of Rockingham Kwinana, Mirrabooka, Midland**
- **Presentations made to participating services**
- **Trial undertaken and documented**
- **Results currently in process of analysis**
- **Results being disseminated**



Health's Response to Duty to Care

RESOURCES DEVELOPED

- **HealthRight Resource Book – A guide to health information, services and resources in Perth**
- **Brochures on accessing & communicating with GPs, suggested health checks for men and women**
- **HealthRight passport**
- **Documentation for the trial**
- **Resource kit including existing useful information on health issues – e.g. quitting smoking, guidelines for physical activity, alcohol consumption, nutrition and medication advice help lines**
- **Website**



The Role of Peer Supporters

- Encourage and assist clients to set achievable goals regarding their physical health
- Make and attend GP and other allied health care appointments with clients
- Encourage clients to independently attend to their physical health
- Keep clinicians informed about any progress made
- Assist people to access information, services and resources re physical health

The Role of Mental Health Clinicians/Street Doctor



- Identify clients with severe and enduring mental illness interested in dealing with their physical health/do not have a GP
- Encourage clients to attend to their physical health needs
- Refer willing clients to PASS
- Collaborate with GP'S, Ruah Community Services/Hills Community Support Group & Peer Supporters in the best interests of clients' physical health

The Role of HealthRight and Non-Government agencies



- Develop training program and all resources/ find resources
- Train, select, induct, pay, supervise peer supporters
- Collect evaluation data
- Provide relevant information to service providers
- Coordinate referrals and locate services for participants
- Reporting

Identified Training Needs For Peer Supporters



- Roles and responsibilities
- Communication skills and boundary setting
- Dealing with social exclusion of mentally ill
- Disclosure/confidentiality/legal issues and integrity
- Dealing with difficult situations/risk management
- Duty of care and accountability

Identified Training Needs For Peer Supporters



- Shared care, case management and family support
- Own needs/ self care and debriefing
- Use of resources
- Training for others on the trial
- Accessing related services
- Assertiveness and empowerment
- Assisting participants to navigate the system



Trial experiences

- The trial was highly successful in Rockingham Kwinana and in Midland
- In those areas referrals were made and participants assisted
- The trial was unsuccessful in Mirrabooka – referrals were not made
- Mirrabooka Peer Supporters moved to Joondalup Community Mental Health - both then secured other jobs and were not replaced due to time constraints



Health's Response to Duty to Care

Identified Barriers to Success

- Insufficient training of staff on the benefits of peer support
- No motivation without a “champion”
- Lacked impetus with staff changes/ key people away
- Staff concern regarding confidentiality (only 37% of all clinicians believed confidentiality would be maintained)
- Lack of clear understanding regarding role of peer supporters and uncertainty regarding their status
- Poor administrative support
- Lack of prior experience of professional consumer involvement



Early Results – Participants

- 32 clients were referred as participants
- 25 clients elected to receive peer support
- 12 already had a GP
- 9 were supported to find a GP
- 20 walked regularly with the peer supporter to increase daily physical activity



Early Results – Participants

- 11 were linked with a community exercise facility
- 8 lost weight over the course of the trial
- 7 were encouraged to change dietary habits and eat healthier foods
- 3 were supported to give up smoking and 2 others are still trying to quit



Early results – Peer Supporters

- All 4 peer supporters have reported improvements in their confidence, and self esteem
- 2 have reported better mental and physical health as a result of the trial
- 2 have commented on how personally rewarding it was to work as a Peer Supporter
- 2 reported that they felt accepted as peers by the professionals they worked with



TARGETED HEALTH PROMOTION

(allied project work)

Key Strategies:

- **Art Project**
- **Website www.healthright.org.au**
- **On-going communications and media involvement/promotional resources**
- **HealthRight kits - Mental Health Week**
- **Healthy Lifestyles Program - Healthway funding**
- **Awards Program**

Waking up strong in the morning





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