



Smart Mental Health Care where it matters

Primary Mental Health Intervention Service
(PRIMHIS)

Presentation to:
Collaborative Care Conference June 2012, Vancouver
Michael O'Connell – Clinical Nurse Director
(Mental Health & Addiction)
Lakes District Health Board
Rotorua
Aotearoa, New Zealand

Political and National Drivers...

- Te Kokiri –The New Zealand Mental Health and Addiction Action Plan- 2006-2015

Build and strengthen the capacity of Primary Health Care sector to promote mental health & wellbeing & to respond to the needs of people with mental illness and Addiction

- Building capacity
- Building linkages
- Strengthening the role of PHOs

Political and National Drivers...

- Te Tahuhu: The 2nd NZ MH&A Plan (2005)
- Mental Health & Addiction Implementation priorities (2010)
- Better, Sooner more Convenient (2007)
- Local Driver:
 - Integrated Sector Model of Care (2010)

The beginnings of integration - 2008



- MH Primary Liaison nurse - some brief work alongside the GP, working differently, more flexibly
- Original intent was to support transition of secondary care clients back to primary care
- Developed at request of GPs to the 'informal' provision of assessment and early intervention for people presenting to their GP with mild-moderate mental health issues

Aims evolved to...

- Provide assessment at the practice, short term intervention and referral on as appropriate
- To provide assistance in relapse prevention for people with ongoing mental health diagnosis in GP care
- Navigation/smoothing pathways for clients
- Keep relevant clients in Primary Care setting
- Reduce stigma

PRIMHIS- 2010

- A 12 month pilot with focus on nurse led, brief intervention service using a stepped care approach.
- Secure and expand the 2008 Mental Health Primary Liaison position (at risk)
- Pilot resourced from Secondary care
- Mutually negotiated clinics
- Nurse led service within General Practices with a emphasis on shared care

- GP or Practice nurse initiated referrals
- Consultation/liaison
- **Normalised** access to mental health services
- Provided the opportunity to expand the secondary care CMHN role
- Better, sooner and smarter delivery of primary MH services

Focus on Following Outcomes

- Build capability of PHC practitioners to assess MH & A needs of people & to meet these when they can be met within PHC settings
- Better coordination & system support at the primary, community and secondary level.
- Strengthening the role of PHO's in communities to promote mental health and wellbeing and prevent mental illness.

Service provision & growth

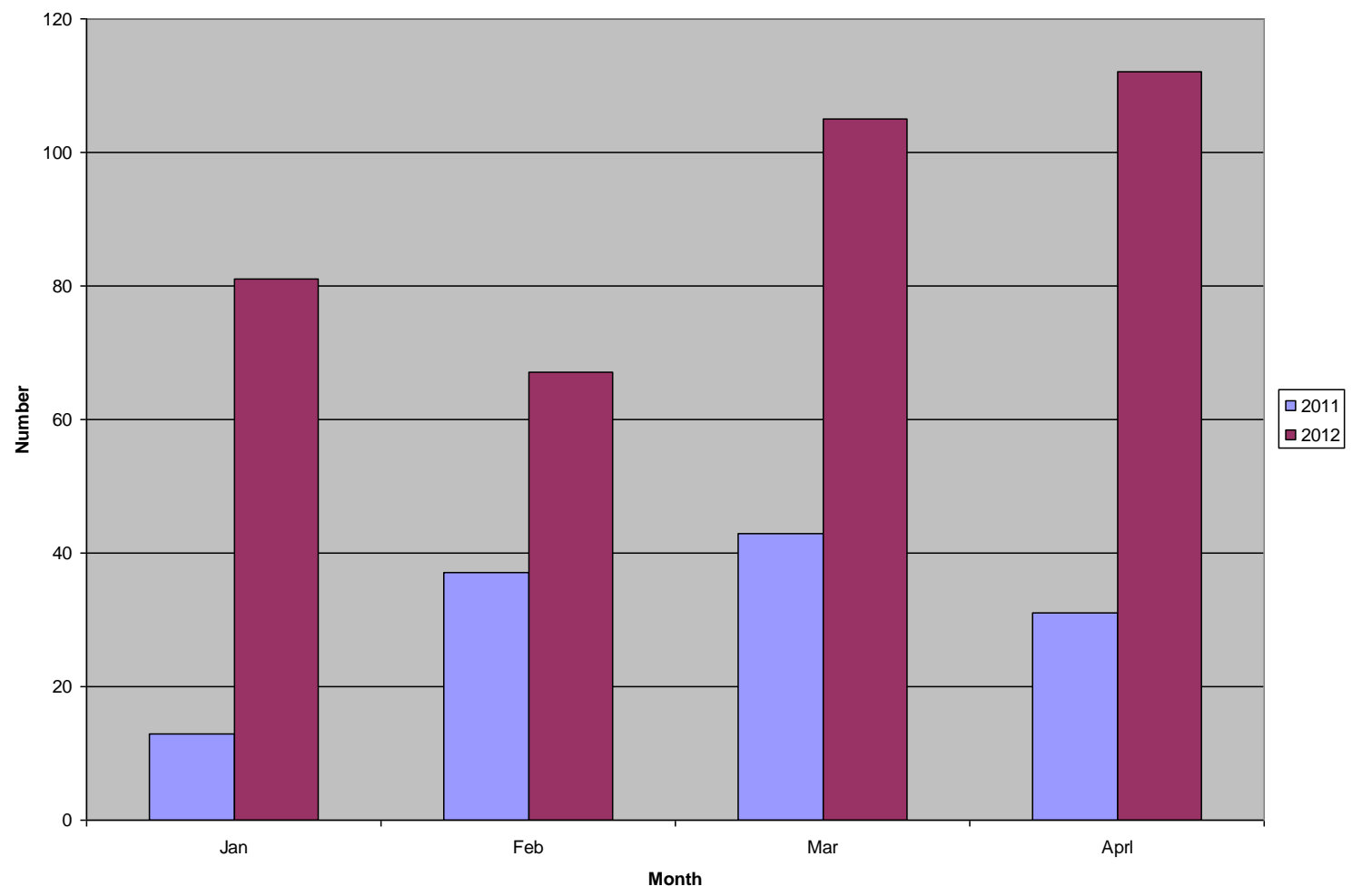
- MH Primary Liaison 2008 & 09 – relationship with 3 GP Practices
- PRIMHIS – 2010 formal expansion into 6 further GP Practices and 1 Rural Nurse led Practice
- PRIMHIS: New model of care developing
- Further funding support secured through F & P of 1.2fte for 2011 onwards.
- PRIMHIS 2012 Further expansion into 5 remaining practices



Healthy Communities – Mauriora!

New Referrals 2011 & 2012

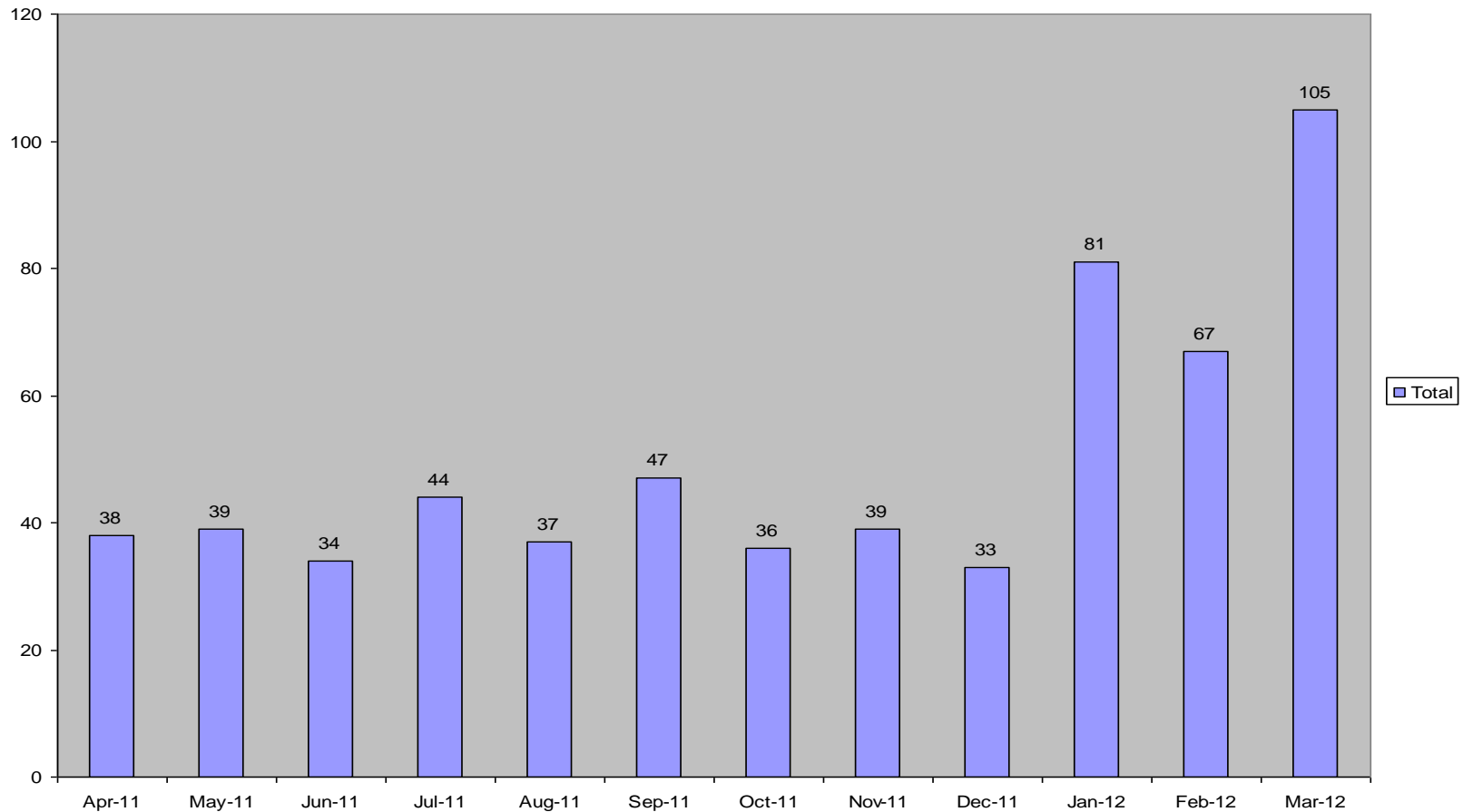
New Referrals



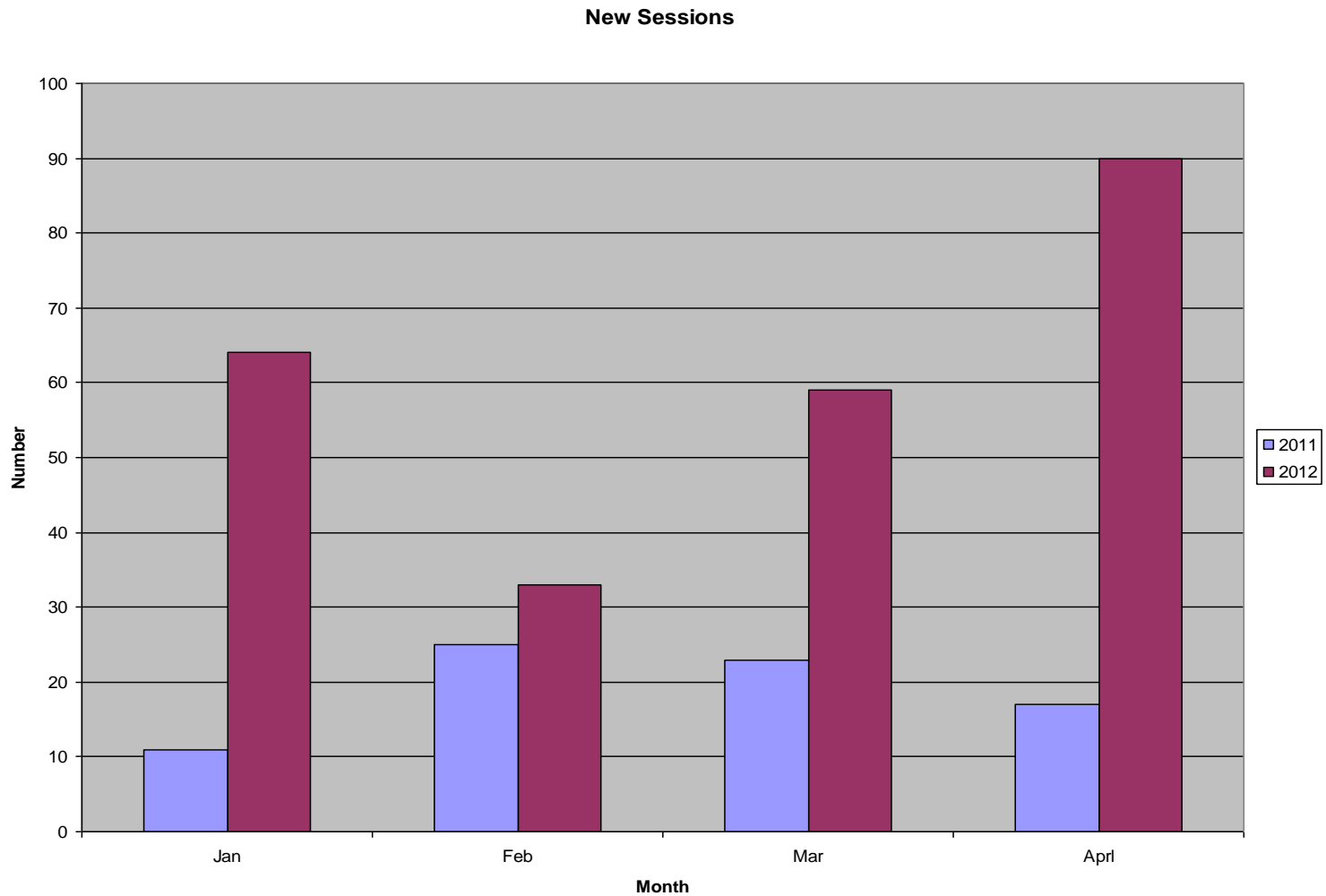
Healthy Communities – Mauriora!

New referrals to PRIMHIS by month

Total New Referrals Per Month

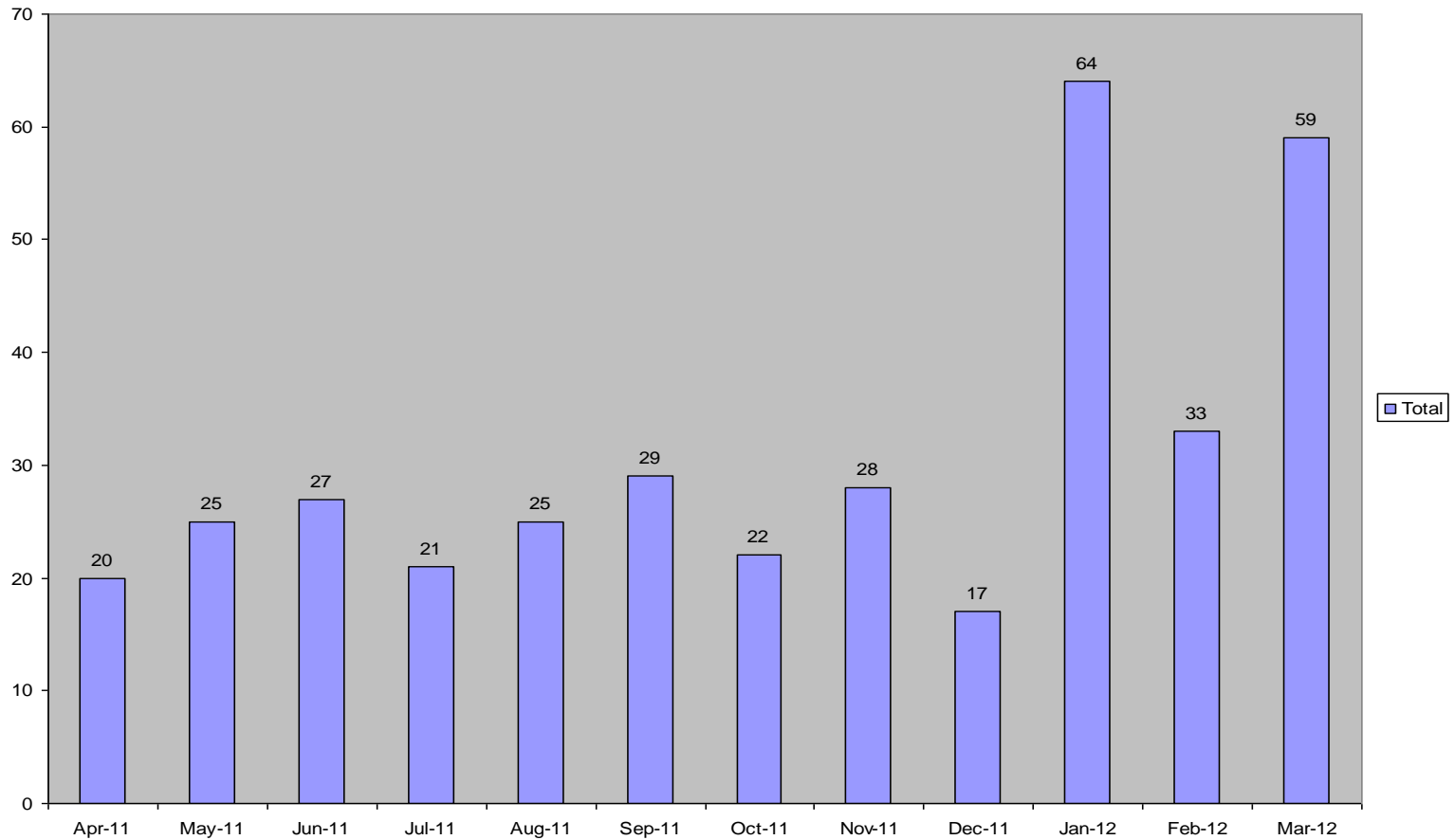


New session 1st four months

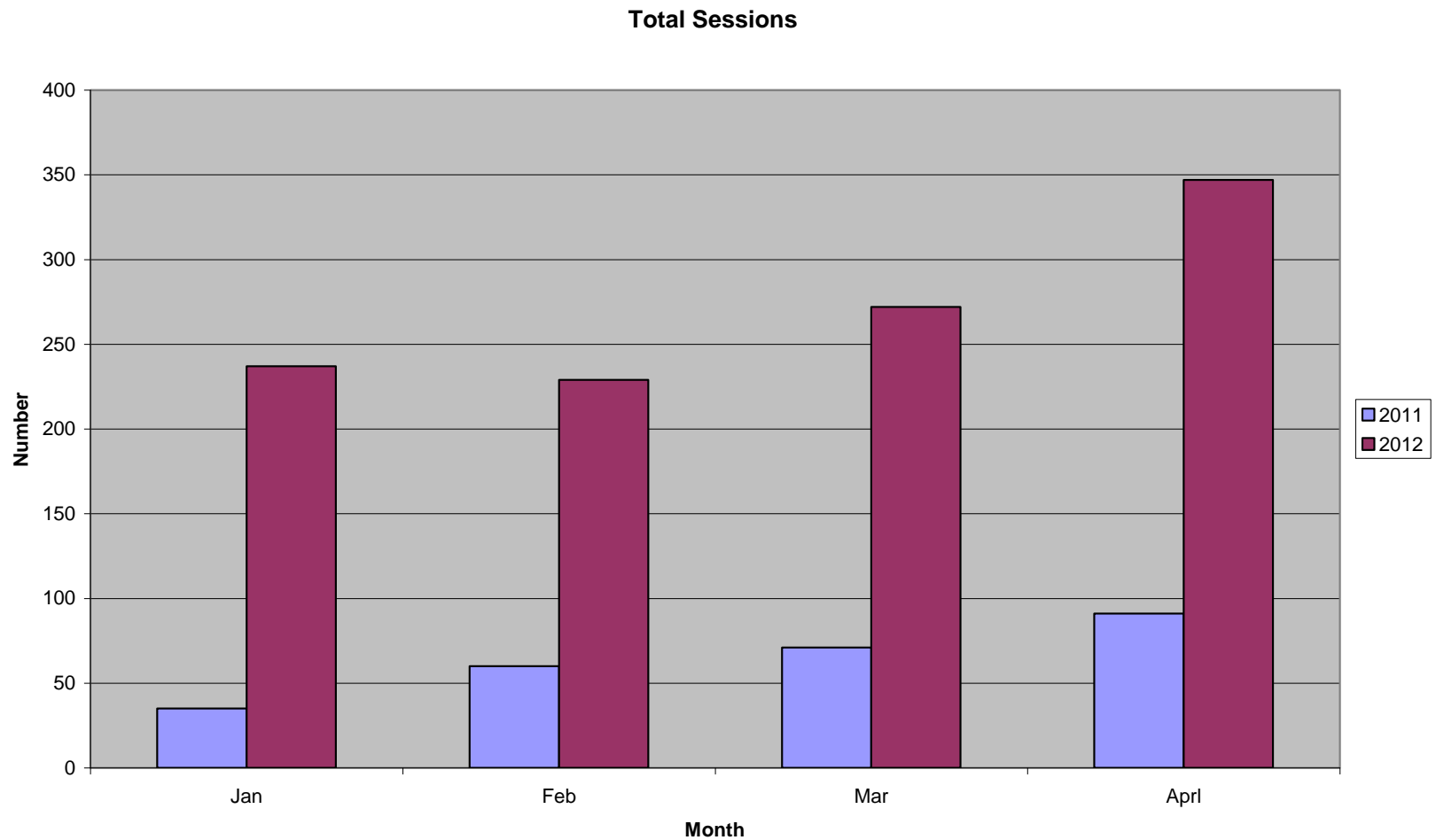


Healthy Communities – Mauriora!

Total Number of New Face to Face Sessions

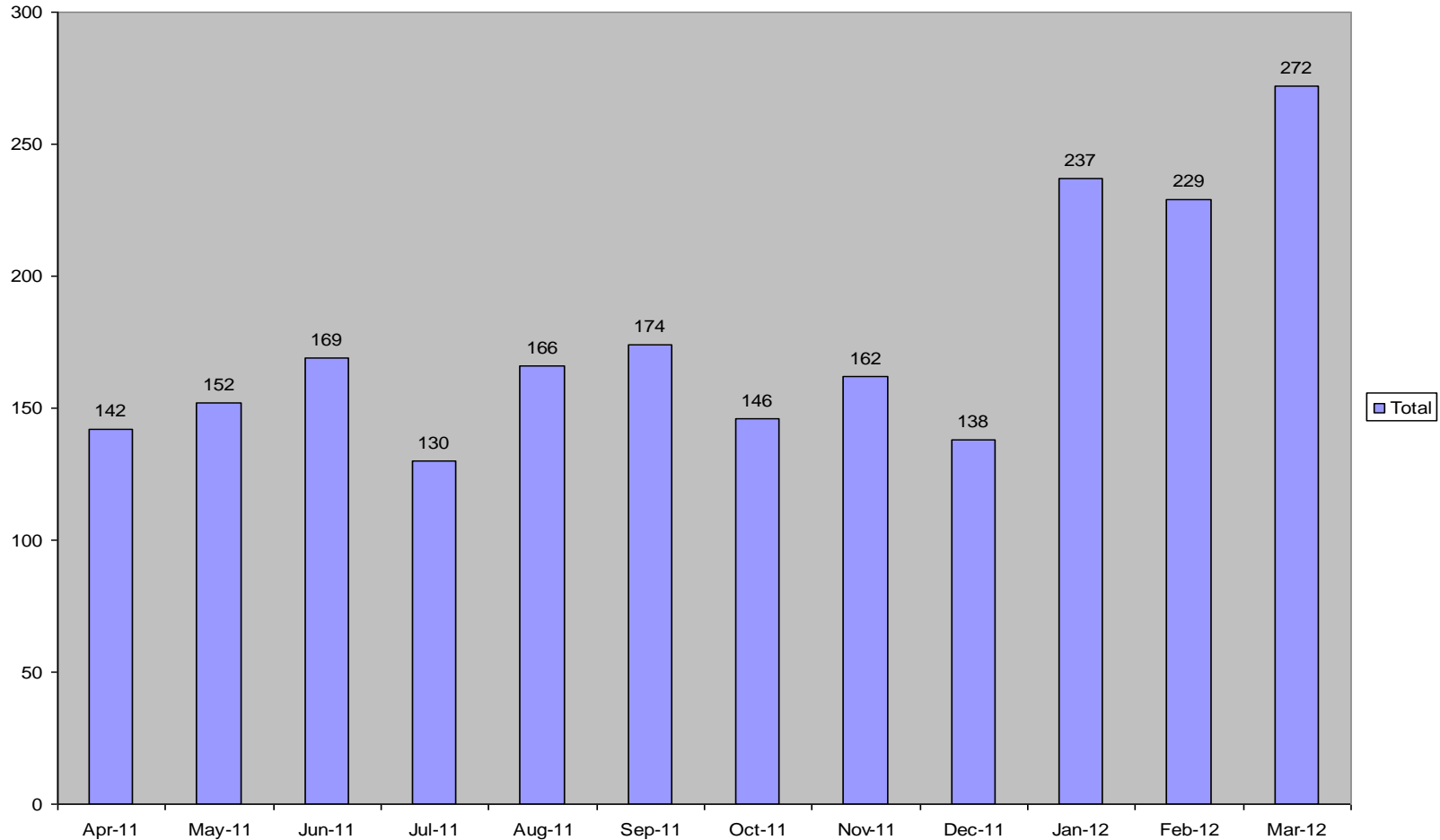


Total sessions 1st four months

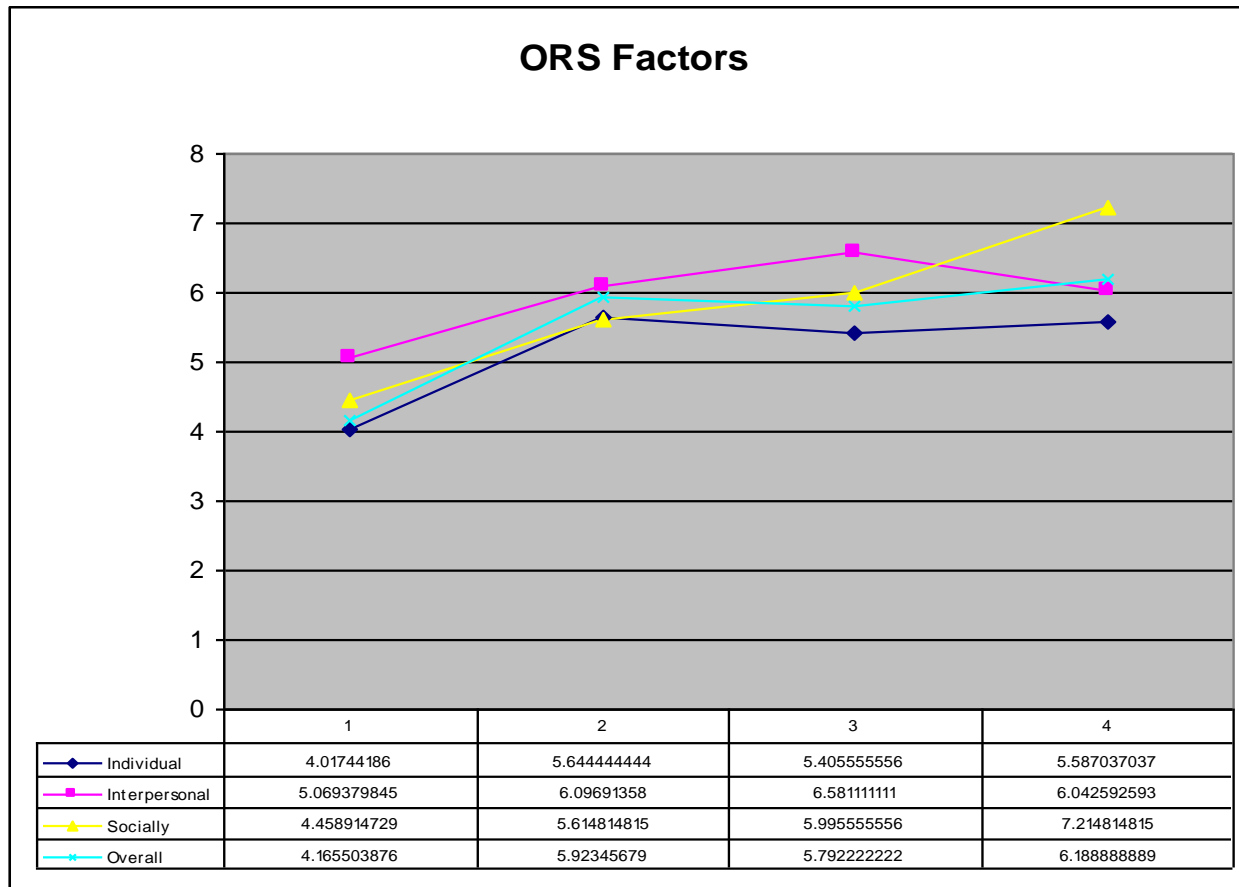


Total face to face Sessions

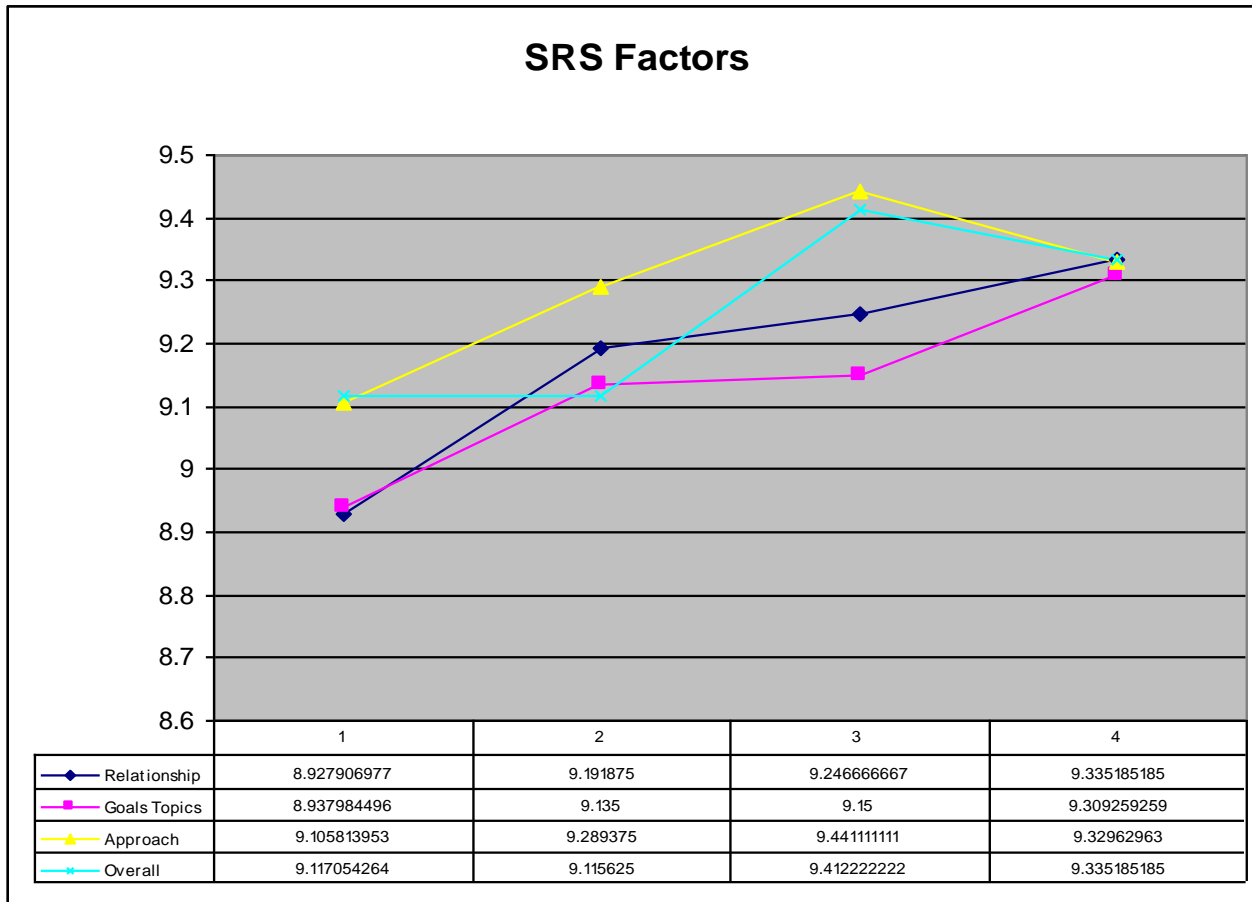
Total Number of Face to Face Sessions Per Month



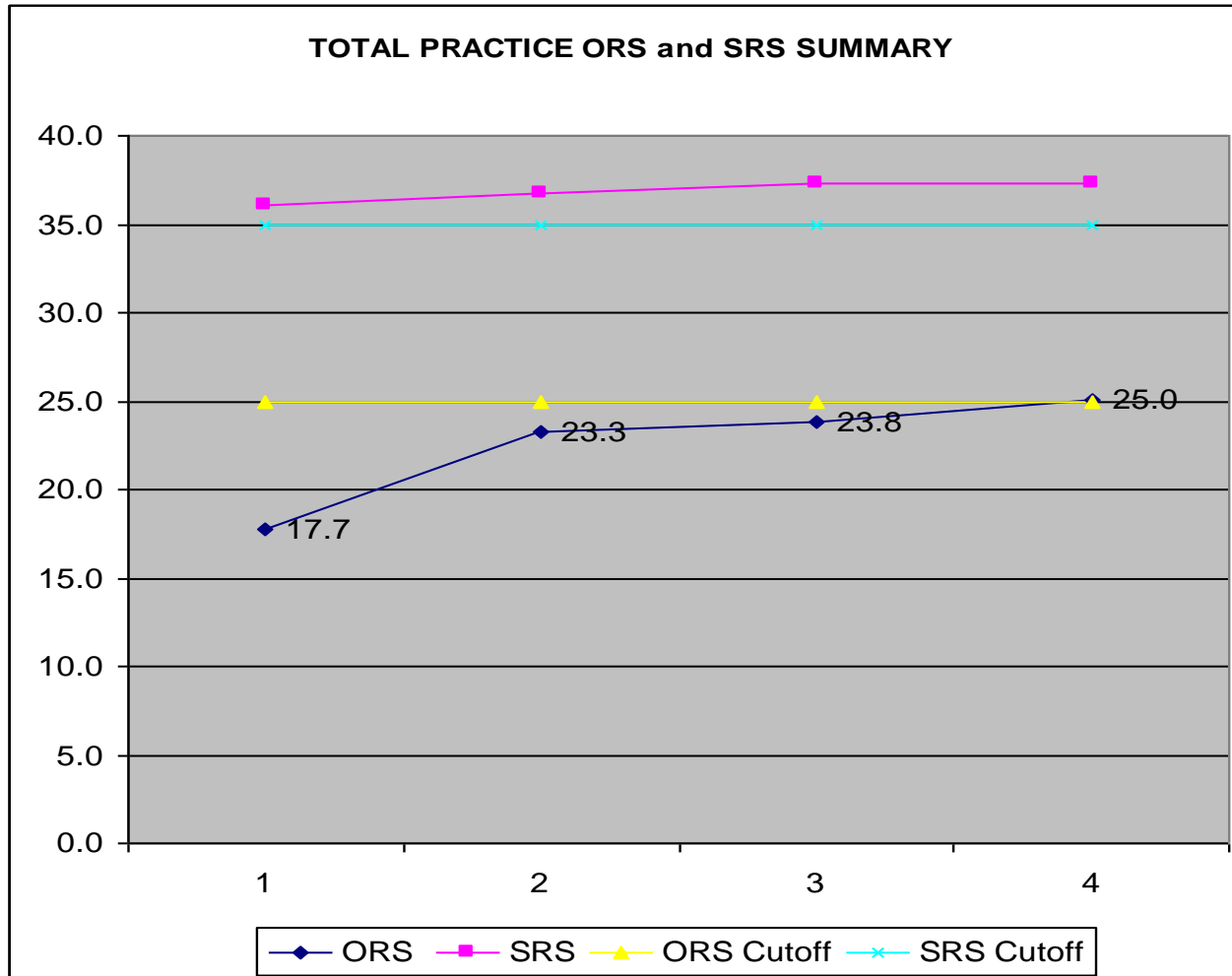
ORS Factors



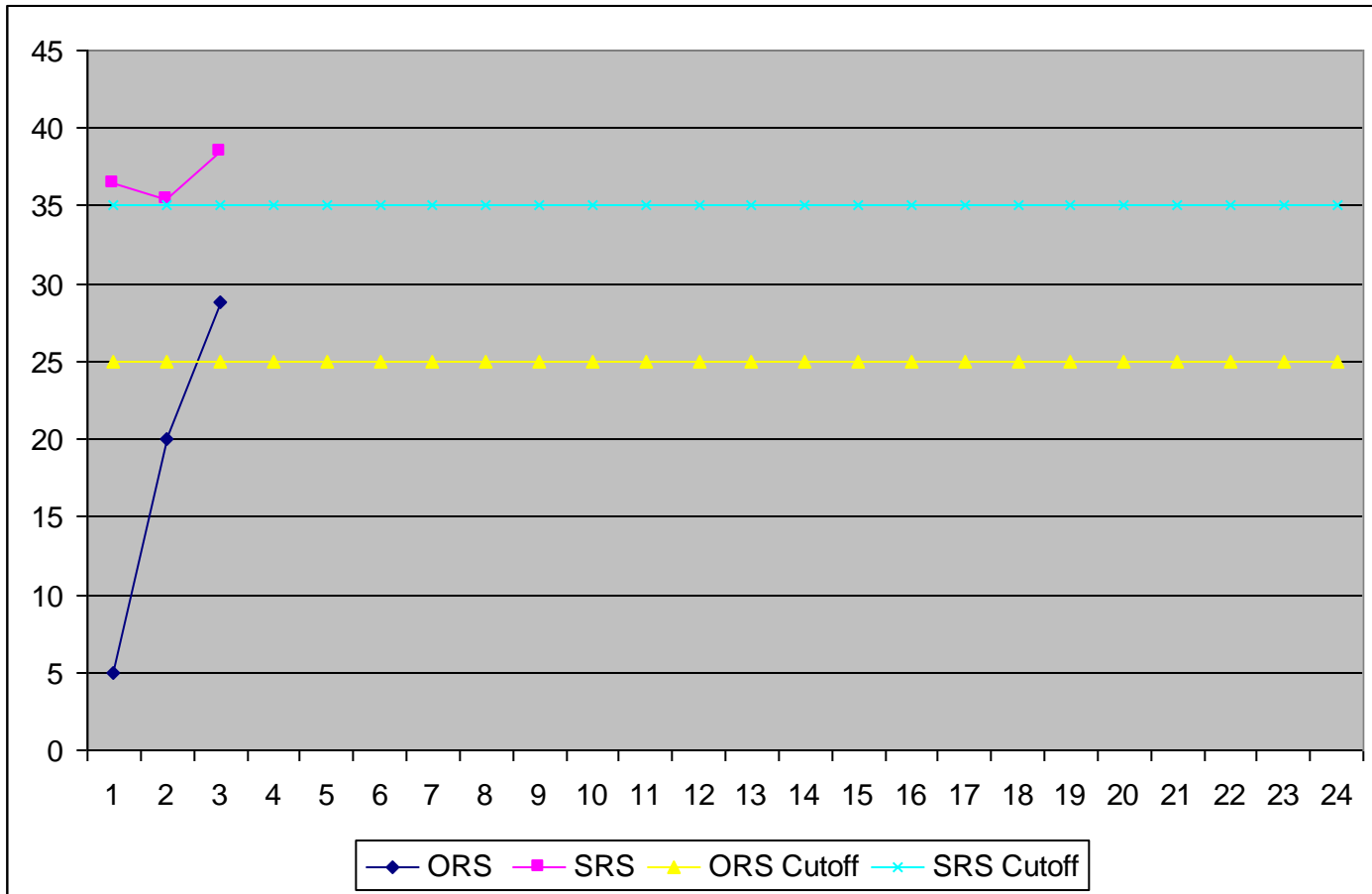
SRS Factors



Total practice ORS and SRS summary (132 discharges)



Individual Example





Healthy Communities – Mauriora!

Summary GP/Practice Nurse Evaluations (24)

What's working well?

- Easily accessible, free, convenient, in a familiar setting
- Seen promptly, good documentation - works well having notes in practice system + open verbal communication
- Effective interventions, positive feedback from patients - Fantastic!
- Prepared to see people outside guidelines
- Being able to refer on as needed
- Smoother navigation



Evaluation cont...

What's made the most difference?

- Prompt/quick early intervention—better outcomes
- Free, easily accessible with good continuity of care
- Helping Rural nurses' workload- access to MH care
- Explores psycho-social aspects
- Assists with diagnosis
- Problem solving- helping people get 'unstuck'
- Certainty of appointments

Evaluation cont..

What's not working well?

- Costs for room usage overlooked
- Sometimes delay in being seen - need more clinics
- DNAs / cancellations

How could we do this better?

- More staff & more clinics
- Doing well- keep it up
- Keep trying to prevent DNAs with 'difficult to reach populations'

Potential expansion to..

- Kaupapa Maori General Practice
- After hours 'all health Drop in clinics'
- Education and promotion
- Find innovative ways of working with Health providers
- Youth mental health

The PRIMHIS team



Healthy Communities – **Mauriora!**

Acknowledgements

- **PRIMHIS NURSES-** Jenny Collier, Lorraine Ward, Cathy Sheely, Lisa Wallace, John Emery, Trudy Bowden, Sarah Barclay, Gerri Slater, M O'Connell
- Rotorua General Practice Group
- George Furstenburg, Professional Advisor Psychology, Lakes DHB
- Psychiatry resource

Maori whakatauki

Ma to rourou

Ma toku rourou

Ka ora te iwi

*With your input
and my input -
the basket will be full*

