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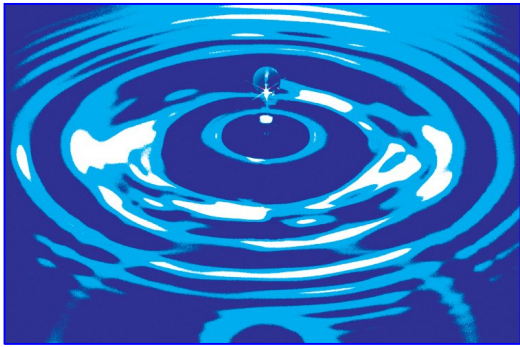
Supported Options in Lifestyle  
And Access Services Inc.  
(SOLAS)

Mental Health Regional Project

“Mental Health  
Regional Options”

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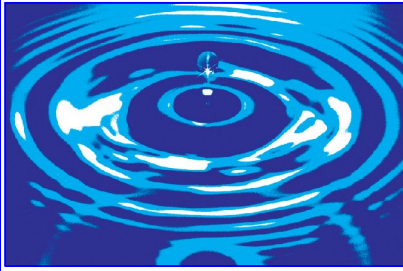
December 2007



H.S.A. Consultancy  
“Mental Health Regional Options”

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## H.S.A. Consultancy “Mental Health Regional Options”

### ACKNOWLEDGEMENTS

This report reflects the vision and commitment generated by the committee of management of SOLAS.

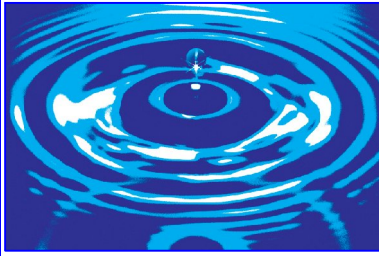
The committee have sought to take their organisation into a more regional response believing that access to services, such as theirs is a right of all people no matter where they live.

Funding for this project was made available via DSQ with the Strengthening Non Government Organisations Initiative, Organisational Planning Implementation.

Sincere thanks must go to all the individuals and services in Charters Towers, The Burdekin and Ingham who participated in this project with the hope that it may benefit their community.

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“Mental Health Regional Options”

## 1. INTRODUCTION

In 2006/2007 SOLAS participated in the Organisational Planning Project funded by Disability Services Queensland. This participation enabled SOLAS to undertake a Business and Strategic Planning process which resulted in the development of a Business Plan for 2006-2011.

SOLAS was successful in gaining funding to help implement the strategic outcomes of this plan and this project seeks to implement Strategic Outcome 1:2 & 1:3 which relate to Service Access.(see Appendices: Business Plan)

What can SOLAS do?

This question was posed to services in Ingham, The Burdekin and Charters Towers. Their identification of local needs for development and capacity building are the basis of this report and will guide the future direction of regional service response for SOLAS into the coming years.

Why respond to regional needs?

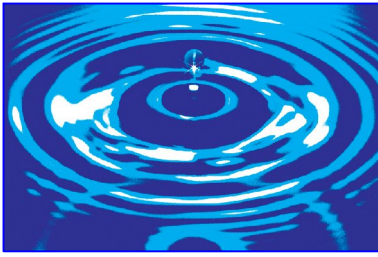
Access is about equity of service provision to all in need and it requires a commitment from services to tackle the hard areas and not to ignore issues or take the easy road. SOLAS is showing its commitment to access by undertaking this study to establish the need in regional areas for service provision, finding out how they could assist or partner to build capacity within regional areas and thus increase access for local people to the mental health services they need.

By undertaking this project, SOLAS is reaffirming its belief in the core values underpinning the organisation and reflected in its Mission Statement.

Dorothy Sellers  
HSA Consultancy

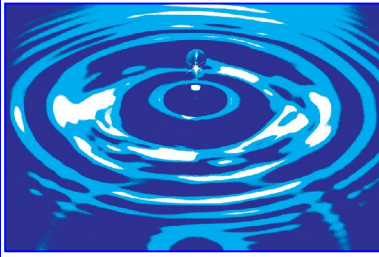
### SOLAS Mission Statement

SOLAS works in partnerships to support people with mental illness and psychiatric disability to live meaningful lives in our community.



## 2. Summary of Recommendations

1. That SOLAS takes opportunities within the regional area to promote and raise awareness of the organisation and the model of support it uses in order to raise the organisations profile regionally and to promote and raise awareness of non-clinical NGO service capacity and skills.
2. That SOLAS seek funding for a Mental Health Regional Community Development position to promote and assist in the development of capacity building and expansion of NGO mental health services in the region and to drive the future connection of SOLAS to the regional areas.
3. That SOLAS take a leadership role in securing, developing delivering and promoting both accredited and non accredited training, for workers in the Non clinical mental health field within the region
4. That SOLAS assist individual non clinical services in the regions to develop their capacity to respond to people with mental illness via staff development, training, mentoring and shadowing.
5. That SOLAS assist regional committee members to understand and develop their individual and organisational role and capacity by working with them in a mentoring and educational “hands on” way.



### 3. Methodology

The purpose of this project was to seek information from the Townsville regional areas of Ingham, Burdekin and Charters Towers on the following:

- What non-clinical services they already had
- What non-clinical services they felt they needed
- How local services felt SOLAS could assist them to build their local capacity.

This purpose drove the methodology chosen, which was a direct questioning and engagement with the local community services sector in each region to ascertain from them the current mental health responses and what they thought were the needs.

From this careful questioning and listening, a feedback of results was compiled and sent to each regional participant for comment. From this was compiled a series of recommendations for SOLAS to inform their future development and service response to the regional areas.

The following shows how the project was developed and implemented over the time frame.

#### Phase 1: August-September 2007

- Develop project plan
- Design methodology
- Compile data base of contacts

#### Phase 2: September-October 2007

- Make initial contact with regional services
- Visit regional services to collect information
- Feedback information to regional services for their comments

### Phase 3: November-December 2007

- Compile report & recommendations
- Present report to SOLAS

This project has actively sought the opinions and views of non government services that provide direct support to people in the Townsville regional area who have a mental illness or psychiatric disability. Workers in community based services who provide employment support, community access, respite and other social and health support have been interviewed by this Project Team.

The views of these organisations have been noted and used to inform the final report and its recommendations.

## Townsville & Region



## 4. Discussion by Geographic Area

### 4:1 Charters Towers

Charters Towers is situated 130kms south east of Townsville North Qld. It has a long history of gold mining and preserves and promotes that history. Its current population is 8,500 and its main industry is agriculture, mining and services.

A major influence on the mental health service delivery in Charters Towers has been Mossman Hall which is a large Mental Health Hospital built on the outskirts of the town which for many years housed men from across Queensland who had a long term mental illness. When the policy of deinstitutionalization was introduced, this hospital was largely closed and a smaller, modern rehabilitation facility was built. Project 300 was instrumental in moving people out of Mossman Hall and into their communities with support from Department of Housing, Disability Services Queensland and Queensland Health.

A common comment from people interviewed was that Charters Towers is absorbing a lot of extra people with mental illness as some people from Mossman Hall prefer to stay in the town. One service provider described the town as “saturated” and the effects of this are that services are finding it hard to find suitable accommodation, activities and employment for residents with a mental illness.

Services are also finding that the stigma attached to mental illness is very much working against people accessing housing and employment. There are many perceptions within the general population of people with mental illness being violent. This opinion is unfortunately re-enforced by living in a small rural community, with a lack of daily support services which may lead to people with a mental illness having a crisis and coming to the attention of the community in a negative way when they are either hospitalized or police intervene.

The provision of a daily support non clinical service was seen by all people interviewed as a positive way of assisting people to more easily manage their lives in the community, however, current services either felt stretched to capacity or unable to meet this need without specialist training and support.

The local employment service is currently very active in supporting clients with a mental illness and seeks innovative ways to do this. They are also seeking funding to add capacity to their service to provide more assistance to this client group.

They would welcome a partnership with SOLAS to promote training and ways of working with clients for local service providers.

Currently the largest providers of care to this client group are Qld.Health via a rehabilitation day service and Blue Care via Project 300. Qld.Health is keen to promote a more flexible service model which assists people to live independently in their community

Whilst services exist for people with mental illness in Charters Towers they appear to lack a true community focus and there seems to be a belief that Qld.Health has a responsibility to provide ongoing care as the hospital did previously. This perception is perhaps stifling the innovative and co-operative approach to service development and delivery to this region.

Whilst services know of each other and refer clients to each other or share clients there appears to be a lack of co-operative planning and co-ordination for future development and capacity building of service provision.

Training of workers to work with people with mental illness was seen as necessary in order to develop existing and future services. Expertise and knowledge about mental illness exists in Charters Towers, but what is lacking is the knowledge of how to develop administer and provide a non clinical support service such as SOLAS.

## 4:2 The Burdekin

The Burdekin Shire is 80 km south of Townsville and includes the twin towns of Ayr and Home Hill and other smaller centres of Brandon, Giru, Jerona, Alva, Wunjunga, Clare, Millaroo and Dalbeg. The Population of the Burdekin is 18,487 as at 30th June, 2001. (2001 Census) The Burdekin is the largest sugar cane producing area in Australia and supports other agricultural work such as small crops and grazing.

The Burdekin currently has no community based support service dedicated to people with a mental illness. Support is offered via a mixture of GP Psychologist, Hospital Community Nurse and referral to Townsville based services. As one service provider commented during the interview “people need more than just counseling.” This was a reference to the lack of non clinical practical support available to people with a mental illness.

All service providers spoken to believe that there was a gap in service provision for clients and that this contributed to the unfortunate crisis situations which occur and need hospital or police intervention, or both. This crisis intervention also added to the general community’s negative perceptions and added to the stigma experienced by people with a mental illness.

The Burdekin Community Association has been pursuing funding to expand its current service provision into the mental health area. It has secured funding for a Mental Health worker, who provides information and referral but wish to expand this into a practical non-clinical support service. They are open to partnering with SOLAS to support funding applications or brokerage of services and are keen to access the knowledge and skills SOLAS has via training, mentoring and shadowing of workers. They currently see a major need for this service in the Burdekin and would support SOLAS in an outreach service if necessary in order to secure services for this client group.

Finding affordable housing was seen as an issue for people with a mental illness. The Burdekin has a low availability of houses for rent and the cost of renting has been pushed up by locals with high wages from the mining sector, who recruits from this rural area.

The local employment service is very keen to see a non-clinical service established as currently they have to work outside of their guidelines in order to support people with a mental illness to overcome barriers to work, such as: accommodation, daily living support, hygiene, recreation and community access. They are an innovative

service that have developed strong links to their clients and skills and knowledge in working with people with mental illness, but strongly see the benefits of having a local support service to refer their clients to. They are keen to partner with and access any training SOLAS might develop or deliver.

The Burdekin Flexible Respite Service does not currently have any people with mental illness accessing its services. They are keen to open up a dialogue with SOLAS to promote and develop this possibly happening. Their current accommodation service is being expanded and could include provision for people with mental illness and psychiatric disability. They felt they would need support and training to move into this area of service provision.

The Burdekin area would appear to have several options for service capacity building, but currently lack any non clinical support service. There is one service actively seeking funds to provide this and others who are supportive and could be developed.

The need to develop capacity within existing organisations was evident and would require training of workers, committee members and managers via formal and informal training, shadowing and mentoring.

## 4:3 Ingham

Ingham is located 111 km north of Townsville and 1,482 km from Brisbane. Ingham is basically a sugar town. Set 29 km from the mouth of the Herbert River and 14 m above sea level the town is the administrative capital of the Hinchinbrook Shire. The population of the Hinchinbrook Shire is approximately 15,522. Although the surrounding area supports beef cattle and a number of tropical crops, it is sugar which clearly predominates.

Support to people with mental illness is currently provided via local GP's and the hospital with Community Mental Health having two community nurses. However, it was clearly stated that there was a need for generic non clinical services which would assist people to live more effectively within their community without reaching a crisis point. It was felt that too often the response to people was too late and involved hospitalisation or police intervention. The stigma of mental illness was raised as being a major factor for people preferring at this point to access Townsville hospital services. Any service development would have to include education of the community in order to lower the stigma towards people with mental illness and assist people to access local services.

Recently Ozcare Townsville has been funded to provide the Personal Helpers & Mentors Programme, in Ingham. They currently have one client in Ingham, referred by Townsville Mental Health Services, but appear to be not well known by the community organisations we spoke with and have not been contacted by the community to provide any services. This project spoke to Ozcare and encouraged them to connect with Ingham Parents Support Group to discuss the needs and the possibility of brokering services through them.

Currently Ingham Parents Support Group provides daily support, community access, life style and respite services to people with a disability. They currently do not have any clients with a diagnosed mental illness or psychiatric disability. They are extremely open to the idea of supporting the needs of this client group. They feel they would need SOLAS to partner with them and support them to develop their capacity. The needs they identified were:

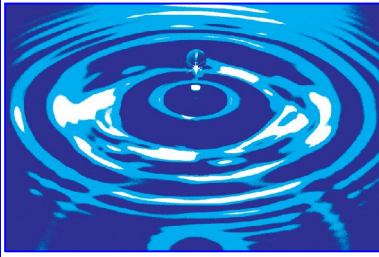
- Training & mentoring of coordinator
- Training of management committee
- Training & mentoring of support workers
- Outreach support from SOLAS
- Case management and professional support from SOLAS

➤ Buddy system of support workers from SOLAS

With the above support they believed they could expand the capacity of their service and offer either a brokerage service via SOLAS or other organisations.

The Hinchinbrook Employment Service estimated that 30% of its client base had a mental illness or psychiatric disability and they found this a very difficult area to respond to as the region had no community support service to refer to. This lack of service options created another barrier for people seeking employment and another difficulty for them in providing support to the job seekers. They were very supportive of the idea of more non clinical service provision that had a non stigmatizing appearance to the broader community and clients. This employment service would like to access any training SOLAS may be able to provide, which includes the Mental Health First Aid Training. They identified the issue of affordable housing as a major problem for their clients. The mining industry recruits from this rural area and this has pushed up the cost of housing and its availability.

All services interviewed were very interested in partnering with SOLAS in creating more services and developing the current capacity within their community. There was a real sense of services having the ability and willingness to work cooperatively and to support each other in securing more access to non clinical services for people with mental illness.



## 5. Recommendations

### 5:1 Promotion & Awareness

- SOLAS could participate more in the regions via local and organisational forums, meetings and service staff meetings.
- SOLAS could promote awareness of its model of support via engagement with local regional organisations.
- SOLAS could designate a worker as a “regional worker” whose focus is to promote and link Solas with the regions.

### 5:2 Community Development

- SOLAS could seek funding for a Regional Worker position which has capacity building and community development in the regional mental health NGO sector as its focus.
- SOLAS regional worker to take initiative in regional areas to assist local services to build their capacity as identified in this report.
- SOLAS regional worker to promote the connecting of regional services to identify local needs and to plan regional solutions.
- SOLAS regional worker to liaise and work along side other regional workers such as QLD Alliance or DSQ to build capacity within regional services

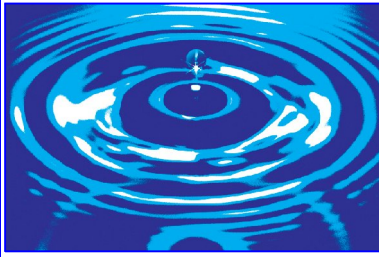
### 5:3 Training

- SOLAS could lobby for, source, promote plan and deliver nationally recognized training in the regional areas to local workers.
- SOLAS could promote, plan and deliver specific training as the need is identified by regional services

- SOLAS could promote and deliver the Mental Health First Aid training to regional services and local communities.
- SOLAS could seek funding opportunities for mentoring of regional workers
- SOLAS could set up collaborative partnerships with others to promote and develop a focus on non-clinical training for workers in the sector.

#### 5:4 Local Service Capacity Building

- SOLAS could promote and encourage the ongoing development of individual services in the regions to increase their capacity to respond to people with mental illness in their community.
- SOLAS could be available for consultation and professional discussions to regional workers and management.
- SOLAS could be available for committees of management of regional services to assist them develop individual and collective capacity and skills.



## 6. Conclusion

Across the three regional towns there emerged some great similarities of concerns and needs. These themes were:

- The stigma still attached to having a mental illness and the problems this gave to people living in a small town where people are so much more likely to know your business. This has led to many people preferring to access Townsville based services.
- The belief in all towns that there was a lack of non clinical services available and that this meant that only when people reached a crisis level did they receive services such as the hospital or came to the attention of police. This lack of services to manage the day to day needs of people can be seen to be adding to the likelihood of a crisis and thus contribute to the stigmatization of people with mental illness
- The need to extend and build the current capacity of existing, local organisations to respond to people with a mental illness, either through encouraging them to expand into this area of support or to train their existing workforce. There was a common perception that their existing workforce could not work with people with a mental illness without specialist skills and that currently they did not have this.
- The need for a coordinated approach by services to access funding and to develop partnerships with each other in order to maximize their success.
- The knowledge and skills that SOLAS has gained over the years are needed to be transferred to the current and future workforces and organisations in the regions and that organisations would welcome assistance from SOLAS in developing, extending and training their current and future workforces.
- The employment services in all towns were a great resource for people with a mental illness and that their client base was strongly made up of this group but lacked services to refer them to in order to support their needs. This has led to employment services becoming very involved with individuals and seeking their own ways to assist them with their daily needs.

It is clear from this study that the time is right for SOLAS to consider assisting the regional areas to develop and expand their capacity to provide non clinical services.

Does SOLAS feel a responsibility to do so and if so how to implement this, is the challenge for the management committee in the coming years.

Planning to enable SOLAS to move into a more regional way of working would require the input of funds to enable workers with community development and capacity building skill sets to be employed and also for current workers to be developed as regional support workers.

It would offer a challenge to the existing experienced SOLAS workers and present opportunities for them to expand and utilise their skill base through providing mentoring and training to regional colleagues.

Working in partnership with Qld.Alliance who is currently seeking funds for regional community development workers may be of benefit to all in order to share scarce resources, skills and knowledge.

The opportunities for non clinical services to be developed in the regions are obvious as is the need for them. The “how to do this” is a major decision for the future management of SOLAS.

## 7: APPENDICES

### *Service Interviews with Service comments*

- Charters Towers
- Ingham
- Burdekin

***Service Interviews: Burdekin***

<b><i>Interview Question 1</i></b>	<b><i>Service Responses</i></b>	<b><i>Service Suggestions</i></b>	<b><i>Report Recommendations</i></b>	<b><i>Your Comments Please</i></b>
<b><i>What do you know about SOLAS and what it does?</i></b>	<p>One worker at Burdekin Community Assoc. knew about SOLAS.</p> <p>All other workers and services needed information.</p>	<p>SOLAS could promote itself more in the regions.</p> <p>It would be good if SOLAS visited the regions more.</p>	<ul style="list-style-type: none"> <li>• SOLAS to establish regional links via regional service provider meetings and/or forums.</li> <li>• SOLAS to provide information about its' service model by attending work teams/meetings in region</li> <li>• SOLAS to seek funding for a regional development worker to work with regional services to promote the model of care SOLAS uses and to assist in the design, linking growth and development of services to people with psychiatric illness in this region</li> </ul>	<b><i>We could learn a lot from SOLAS</i></b>

<b><i>Interview Question 2</i></b>	<b><i>Service Responses</i></b>	<b><i>Service Suggestions</i></b>	<b><i>Report Recommendations</i></b>	<b><i>Your Comments Please</i></b>
<b><i>What is your current level of service provision to people with psychiatric illness/disability in your region?</i></b>	<p>Currently there is no NGO providing non clinical services to people with psychiatric illness in the Burdekin region.</p> <p>Burdekin Community Assoc. has a Mental Health Foundation worker who provides information and referral &amp; they have applied for funding to extend this service to provide practical support.</p> <p>Employment service is working with a significant number of people with psychiatric illness. They are having to provide day to day assistance &amp; would welcome a local service to refer clients to.</p> <p>Budekin Flexible Respite does not currently support people with psychiatric illness.</p>	<p>Burdekin Neighbourhood Assoc. would welcome a brokerage model of service provision from SOLAS if they are not able to attract funding themselves.</p> <p>They are keen to see a service established as the need is evident.</p> <p>Burdekin respite is open to discussion around housing and support.</p> <p>Two services spoke of the need for Outreach services to meet current needs.</p>	<ul style="list-style-type: none"> <li>• SOLAS to distribute this report to all services for comment &amp; discussion.</li> <li>• SOLAS to follow up with meeting of all services in region in 2008.to explore options suggested by them.</li> <li>• SOLAS to use its community development worker to assist Burdekin regional services to develop extend and build capacity to respond to local needs.</li> </ul>	<p><b><i>Working in partnership with SOLAS could benefit us all Making joint submissions could help.</i></b></p>

<i><b>Interview Question 3</b></i>	<i><b>Service Responses</b></i>	<i><b>Service Suggestions</b></i>	<i><b>Report Recommendations</b></i>	<i><b>Your Comments Please</b></i>
<i><b>Do you think the current level of service is adequate for people with psychiatric illness/disability in your region?</b></i>	<p>All services interviewed believed that more was needed.</p> <p>All services believed that services to assist people to remain and live in the community and not reach a crisis level where police or hospitalisation were the only response were desperately needed.</p> <p>The employment service has difficulty referring its clients to any other service provider and finds itself needing to respond to needs outside of its scope in order to assist client's access employment.</p>	<p>Burdekin Flexible Respite is open to talking about including people with psychiatric illness in its client base, perhaps in its future expansion of service provision in housing and support.</p> <p>Burdekin Neighbourhood Assoc. is keen to partner with SOLAS and to access any training and knowledge to develop a local response.</p> <p>All services recognised the need for a local support service and the practical day by day support it would give.</p>	<ul style="list-style-type: none"> <li>• SOLAS regional community worker will link local services to develop a regional plan for future expansion &amp; development of local services.</li> <li>• SOLAS to support local services in writing submissions to obtain funding.</li> <li>• SOLAS to offer assistance in the training of workers.</li> <li>• SOLAS to seek funding to broker services to this region via local services.</li> </ul>	<i><b>It is crucial that this region has more services.</b></i>

<b><i>Interview Question 4</i></b>	<b><i>Service Responses</i></b>	<b><i>Service Suggestions</i></b>	<b><i>Report Recommendations</i></b>	<b><i>Your Comments Please</i></b>
<p><b><i>Can you describe any issues/problems which you think are unique to your area?</i></b></p>	<p>The lack and cost of housing was identified as an ongoing issue. This was linked to the ability of workers in the mines to afford high housing rents.</p> <p>The lack of any support service specific to people with psychiatric illness was seen as a huge gap. This meant people lacked options &amp; caused people to be pushed towards crisis with either police or hospital intervention</p> <p>A high Indigenous population was identified.</p>	<p>Provide a daily support service to help people manage their lives in the community and avoid hospitalisation or crisis intervention by police.</p>	<ul style="list-style-type: none"> <li>• SOLAS to assist local services to explore options to provide housing and support.</li> <li>• SOLAS to apply for funding to provide a regional support service</li> </ul>	<p><b><i>Housing is a major problem for us.</i></b></p>

<i><b>Interview Question 5</b></i>	<i><b>Service Responses</b></i>	<i><b>Service Suggestions</b></i>	<i><b>Report Recommendations</b></i>	<i><b>Your Comments Please</b></i>
<i><b>What help or assistance would you need to provide or extend the capacity of your service to respond to people with psychiatric illness?</b></i>	<p>All services were keen to access the knowledge of SOLAS in promoting people with psychiatric illness to live competently in their community.</p> <p>Training of workers to work effectively with clients in the community</p> <p>Funding of a support service</p>	<p>Need to apply for joint funding with SOLAS and local services.</p> <p>Need to train current and future workers as they are not used to working with people with mental illness.</p>	<ul style="list-style-type: none"> <li>• SOLAS will link with Burdekin regional services to formulate a regional plan for future service delivery.</li> <li>• SOLAS will promote and deliver regional training to potential and current workers.</li> </ul>	<p><b>Training and more Training!</b></p>

<i><b>Interview Question 6</b></i>	<i><b>Service Responses</b></i>	<i><b>Service Suggestions</b></i>	<i><b>Report Recommendations</b></i>	<i><b>Your Comments Please</b></i>
<i><b>What do you think SOLAS could do to assist you to expand access to services to people in your region?</b></i>	<p>Two services suggested that SOLAS provide an outreach service the Burdekin region.</p> <p>SOLAS could teach services how to help people live independently in the community.</p> <p>SOLAS could train workers to provide non-clinical support.</p>	<p>Provide an outreach service to Budekin.</p> <p>SOLAS could provide workers to work in Burdekin and train local workers.</p> <p>SOLAS could provide opportunities for mentoring.</p>	<ul style="list-style-type: none"> <li>• SOLAS to provide a brokerage service model to Burdekin</li> <li>• SOLAS to provide case management support to current services who expand their services</li> <li>• SOLAS to provide a mentoring service to build capacity of local workers.</li> </ul>	<p><b>Training of workers and offering support to any new service we get.</b></p>

***Service Interviews: Charters Towers***

<b><i>Interview Question 1</i></b>	<b><i>Service Responses</i></b>	<b><i>Service Suggestions</i></b>	<b><i>Report Recommendations</i></b>	<b><i>Your Comments Please</i></b>
<p><b><i>What do you know about SOLAS and what it does?</i></b></p>	<p>Qld. Health Service knew what SOLAS organisation did and they were very supportive of the project and any future development of service provision to the area.</p> <p>Other services interviewed needed information about SOLAS and were very interested in the model of service provision.</p>	<p>SOLAS could promote itself more in the regions.</p> <p>SOLAS could visit CT &amp; talk to work groups.</p>	<ul style="list-style-type: none"> <li>• SOLAS to establish regional links via regional service provider meetings and/or forums.</li> <li>• SOLAS to provide information about its' service model by attending work teams/meetings in region.</li> <li>• SOLAS to seek funding for a regional development worker to work with regional services to promote the model of care SOLAS uses and to assist in the design, linking growth and development of services to people with psychiatric illness in this region</li> </ul>	<p><b><i>Important to provide education to a wide range of service providers.</i></b></p>

<i><b>Interview Question 2</b></i>	<i><b>Service Responses</b></i>	<i><b>Service Suggestions</b></i>	<i><b>Report Recommendations</b></i>	<i><b>Your Comments Please</b></i>
<i><b>What is your current level of service provision to people with psychiatric illness/disability in your region?</b></i>	<p>Currently Qld. Health is the largest provider of services to people with psychiatric illness in Charters Towers. They provide a Rehab service via 3 nurses in community for 15 clients.</p> <p>Blue Care via Project 300 provides daily support to people living in community.</p> <p>Neighbourhood Centre currently provides respite service to people with disabilities.</p> <p>Employment service is working with people to eliminate barriers to employment &amp; they find mental illness is a significant barrier to accessing employment.</p>	<p>Qld. Health is very keen to see local community services take up the service they currently provide and further service provision</p> <p>Neighbourhood Centre is open to the idea of expanding its current service to providing in home and respite support to people with psychiatric illness/disability.</p> <p>Employment service is currently looking at how to expand its service to respond to this client groups needs. It identifies difficulty in obtaining daily support services for people with mental illness to support them in their job seeking.</p>	<ul style="list-style-type: none"> <li>• Qld Health and local service providers to meet and discuss future delivery and development of local services.</li> <li>• SOLAS to distribute this report to all services for comment &amp; discussion.</li> <li>• SOLAS to follow up with meeting of all services in region in 2008.</li> <li>• SOLAS to use its community development worker to assist CT regional services to develop extend and build capacity to respond to local needs.</li> </ul>	<p><i><b>We need more services. Need services to stop people getting into crisis situation.</b></i></p>

<i><b>Interview Question 3</b></i>	<i><b>Service Responses</b></i>	<i><b>Service Suggestions</b></i>	<i><b>Report Recommendations</b></i>	<i><b>Your Comments Please</b></i>
<i><b>Do you think the current level of service is adequate for people with psychiatric illness/disability in your region?</b></i>	<p>All services interviewed believed that more was needed.</p> <p>All services believed that services to assist people to remain and live in the community and not reach a crisis level where police or hospitalisation were the only response were desperately needed..</p> <p>The employment service has difficulty referring its clients to any other service provider and finds itself needing to respond to needs outside of its scope.</p>	<p>Qld Health have more packages waiting but no-one currently to take on the service provision.</p> <p>P300 have more which Blue care may take on.</p> <p>HASP: Housing &amp; Support Packages Dept/Housing/Qld Health identify &amp; DSQ Support.</p>	<ul style="list-style-type: none"> <li>• SOLAS regional community worker will link local services to develop a regional plan for future expansion &amp; development of local services.</li> <li>• Assist in writing submissions to obtain funding.</li> <li>• Assist in the training of workers.</li> <li>• Assist in developing a model of care to respond to local needs</li> </ul>	<i><b>Community capacity building is a key to addressing this issue.</b></i>

<b><i>Interview Question 4</i></b>	<b><i>Service Responses</i></b>	<b><i>Service Suggestions</i></b>	<b><i>Report Recommendations</i></b>	<b><i>Your Comments Please</i></b>
<p><b><i>Can you describe any issues/problems which you think are unique to your area?</i></b></p>	<p>All services interviewed spoke of the “stigma” attached to mental illness in Charters Towers and the difficulties encountered by people trying to live ordinary lives in the town.</p> <p>The past history of having a large mental hospital in the town and the belief of “patients” being “dangerous” was spoken of and linked to current attitudes, stigma and beliefs.</p> <p>The assimilation of so many people with mental illness into a small town was identified as an issue. The cause of this was linked to the de-institutionalisation of Mossman Hall and some ex patients choosing to stay in the region.</p> <p>Housing was identified as a major issue. It is both expensive and scarce.</p> <p>A high Indigenous population was identified.</p>		<ul style="list-style-type: none"> <li>• SOLAS to provide assistance to local services to promote the image of people with mental illness</li> <li>• SOLAS to promote community education</li> </ul>	<p><b><i>Addressing stigma is vital to enhancing services available to consumers, particularly in terms of employment and housing. Community is “saturated” with people with psychiatric illness from old hospital.</i></b></p>

<b><i>Interview Question 5</i></b>	<b><i>Service Responses</i></b>	<b><i>Service Suggestions</i></b>	<b><i>Report Recommendations</i></b>	<b><i>Your Comments Please</i></b>
<b><i>What help or assistance would you need to provide or extend the capacity of your service to respond to people with psychiatric illness?</i></b>	All services were keen to access the knowledge of SOLAS in promoting people with psychiatric illness to live competently in their community. Training of workers to work effectively with clients in the community and training of the committee members in the governance of the organisation.	Need to apply for joint funding with SOLAS and local services. Need to train current workers as they are not used to working with people with mental illness and find them “scary”. Don’t know how to get this number of people with mental illness “fitting into the community”.	<ul style="list-style-type: none"> <li>• SOLAS will link with CT regional services to formulate a regional plan for future service delivery.</li> <li>• SOLAS will promote and deliver regional training to potential and current workers.</li> <li>• SOLAS will assist current and potential committee members to build their knowledge, skills and capacity.</li> </ul>	<b><i>Training for our workers as they are not used to dealing with people with mental illness</i></b>

<i><b>Interview Question 6</b></i>	<i><b>Service Responses</b></i>	<i><b>Service Suggestions</b></i>	<i><b>Report Recommendations</b></i>	<i><b>Your Comments Please</b></i>
<i><b>What do you think SOLAS could do to assist you to expand access to services to people in your region?</b></i>	<p>Two services suggested that SOLAS provide an outreach service to Charters Towers.</p> <p>SOLAS could teach services how to help people live independently in the community.</p> <p>SOLAS could train workers to provide non-clinical support.</p>	<p>Provide an outreach service to CT.</p> <p>SOLAS could provide workers to work in CT and train local workers.</p>	<ul style="list-style-type: none"> <li>• SOLAS to provide a brokerage service model to Charters Towers</li> <li>• SOLAS to provide case management to current services who expand their services</li> <li>• SOLAS to provide a mentoring service to build capacity of local workers.</li> </ul>	<p><i><b>Outreach service.</b></i></p> <p><i><b>Training</b></i></p> <p><i><b>A phone service to help with advice.</b></i></p>

*Service Interviews: Ingham*

<i>Interview Question 1</i>	<i>Service Responses</i>	<i>Service Suggestions</i>	<i>Report Recommendations</i>	<i>Your Comments Please</i>
<b><i>What do you know about SOLAS and what it does?</i></b>	<p>The Ingham Parents Support Group knew about SOLAS and what they did.</p> <p>Other services interviewed had very little knowledge of SOLAS.</p> <p>Services wanted to know what SOLAS did and how they provided services.</p> <p>Information was left with each service.</p>	<p>Establish links with the local service network.</p>	<ul style="list-style-type: none"> <li>• SOLAS to establish regional links via regional service provider meetings and/or forums.</li> <li>• SOLAS to provide information about its' service model by attending work teams/meetings in region.</li> <li>• SOLAS to seek funding for a regional development worker to work with regional services to promote the model of care SOLAS uses and to assist in the design, linking growth and development of services to people with psychiatric illness in this region</li> </ul>	<p><b><i>Attending our regional network meeting is a good idea.</i></b></p>

<b><i>Interview Question 2</i></b>	<b><i>Service Responses</i></b>	<b><i>Service Suggestions</i></b>	<b><i>Report Recommendations</i></b>	<b><i>Your Comments Please</i></b>
<p><b><i>What is your current level of service provision to people with psychiatric illness/disability in your region?</i></b></p>	<p>Currently there is no NGO providing specific service to people with mental illness in this region.</p> <p>The Hinchbrook Employment service works with people who have mental illness and estimate that 30% of their clients would fall into this category.</p> <p>The Hinchbrook Community Support Centre offers support and information to all residents of the area and identified individuals with psychiatric illness.</p>	<p>The Ingham Parents Support Group are open to the idea of expanding its current service to people with psychiatric illness and would like to link with SOLAS to learn from them. They believe brokerage of services would be good.</p> <p>The employment service would like to see options for support established in Ingham as they find it difficult to manage client needs.</p> <p>Ozcare Mentors Programme identified by Community Centre but not much known about it.</p>	<ul style="list-style-type: none"> <li>• SOLAS to distribute this report to all services for comment &amp; discussion.</li> <li>• SOLAS to follow up with meeting of all services in region in 2008.</li> <li>• SOLAS to use its community development worker to assist Ingham regional services to develop extend and build capacity to respond to local needs.</li> <li>• SOLAS to encourage &amp; support Ozcare Personal Helpers &amp; Mentors Program to respond to need in this area.</li> </ul>	

<i><b>Interview Question 3</b></i>	<i><b>Service Responses</b></i>	<i><b>Service Suggestions</b></i>	<i><b>Report Recommendations</b></i>	<i><b>Your Comments Please</b></i>
<i><b>Do you think the current level of service is adequate for people with psychiatric illness/disability in your region?</b></i>	<p>All services interviewed believed that more was needed.</p> <p>Especially services which assisted people to live in their own community and not reach a crisis level where police or hospitalisation were the only response</p> <p>The employment service has difficulty referring its clients to any other service provider and finds itself needing to respond to needs outside of its scope.</p>	<p>Extend the existing service provision of Ingham Parents Support Group either via brokerage model or direct funding to them.</p> <p>Develop the service provision of Ozcare via its Personal Helpers &amp; Mentors Program as they are currently funded to service Ingham.</p>	<ul style="list-style-type: none"> <li>• SOLAS regional community worker will link local services to develop a regional plan for future expansion &amp; development of local services.</li> <li>• SOLAS will co-operate and share information with Ozcare to assist them to develop their service response to the Ingham needs.</li> <li>• SOLAS will work with IPSTG to expand their service provision and develop their staff</li> </ul>	<p><i><b>The stigma is a real issue and barrier to using local services. Need services to stop the crisis happening.</b></i></p>

<b><i>Interview Question 4</i></b>	<b><i>Service Responses</i></b>	<b><i>Service Suggestions</i></b>	<b><i>Report Recommendations</i></b>	<b><i>Your Comments Please</i></b>
<p><b><i>Can you describe any issues/problems which you think are unique to your area?</i></b></p>	<p>All services interviewed spoke of the “stigma” attached to mental illness in Ingham. They linked this to the small community and everyone knowing everyone. It was said that often people preferred to go to Townsville for treatment or services to avoid local knowledge of their illness.</p> <p>Housing was identified as a major issue. It is both expensive and scarce. This was linked to the capacity of people working in the mines to pay high prices for housing.</p> <p>A high Indigenous population was identified.</p>	<p>Service provision needs to be seen as “generic” and not identifiable as just for people with psychiatric illness. EG the employment service is for all to use.</p> <p>Services do not identify with uniforms and cars with emblems etc.</p>	<ul style="list-style-type: none"> <li>• SOLAS to provide assistance to local services to promote the image of people with mental illness</li> <li>• SOLAS to promote community education</li> </ul>	

<b><i>Interview Question 5</i></b>	<b><i>Service Responses</i></b>	<b><i>Service Suggestions</i></b>	<b><i>Report Recommendations</i></b>	<b><i>Your Comments Please</i></b>
<p><b><i>What help or assistance would you need to provide or extend the capacity of your service to respond to people with psychiatric illness?</i></b></p>	<p>All services were keen to access the knowledge of SOLAS in promoting people with psychiatric illness to live competently in their community.</p> <p>Training of workers to work effectively with clients in the community and training of the committee members in the governance of the organisations.</p>	<p>SOLAS to work with local services to support train and mentor staff.</p> <p>SOLAS to “Buddy” a service to develop its capacity and knowledge to provide services to people with psychiatric illness.</p>	<ul style="list-style-type: none"> <li>• SOLAS will promote and deliver regional training to potential and current workers.</li> <li>• SOLAS will assist current and potential committee members to build their knowledge, skills and capacity.</li> <li>• SOLAS will develop links to any service which expands its capacity and act as a “Buddy” or Mentor to that service.</li> </ul>	

<i><b>Interview Question 6</b></i>	<i><b>Service Responses</b></i>	<i><b>Service Suggestions</b></i>	<i><b>Report Recommendations</b></i>	<i><b>Your Comments Please</b></i>
<p><i><b>What do you think SOLAS could do to assist you to expand access to services to people in your region?</b></i></p>	<p>One service would like to expand its service provision and would like SOLAS to broker to it or support its independent expansion.</p> <p>SOLAS could teach services how to help people live independently in the community.</p> <p>SOLAS could train workers to provide non-clinical support.</p>	<p>SOLAS could apply for extension of its funds to provide regional support and then broker out this service to local providers.</p> <p>SOLAS could provide an outreach case management service for local services who build their capacity.</p> <p>SOLAS could provide training to local workers.</p>	<ul style="list-style-type: none"> <li>• SOLAS to provide a brokerage service model to Ingham</li> <li>• SOLAS to provide case management to current services who expand their services</li> <li>• SOLAS to provide a mentoring service to build capacity of local workers.</li> </ul>	<p><b>Training of workers to work with people with mental illness.</b></p>