
**A COLLABORATIVE APPROACH TO CAPACITY BUILDING IN THE WA NDIS
MY WAY TRIAL SITES – COMMUNITY OF PRACTICE**



WAAMH

**Western Australian Association
for Mental Health**

Peak body representing the Community Managed Mental
Health sector in Western Australia

Proposal Date – February 2015.

Western Australian Association for Mental Health
City West Lotteries House, 2 Delhi Street, West Perth WA 6005
ABN: 15 164 640 637

T: 9420 7277 E: reception@waamh.org.au W: www.waamh.org.au

Introduction

The Western Australian Association for Mental Health (WAAMH) is the peak representative body for the community mental health sector in Western Australia. Our membership comprises more than 150 organisations and individuals and we work for the benefit of people with mental health issues and their families.

WAAMH considers the National Disability Insurance Scheme (NDIS) to be an important, long overdue reform and welcomes the inclusion of people with psychosocial disability in the scheme. We also recognise that there are unique principles of service, history, context and language in mental health that will need to be recognised and responded to for the scheme to operate effectively for people with psychosocial disability.

Background

The challenges for people with a psychosocial disability in accessing effective support through the NDIS have been documented at a national level, most recently by Mental Health Australia¹. WAAMH acknowledges the state by state differences due to variations in the bilateral agreements, and that the Western Australian agreement is unique due to the decision to trial two different NDIS models across three trial sites in WA – the Commonwealth model operated in the Perth Hills by the National Disability Insurance Agency (NDIA), and the State model operated by the Disability Services Commission (the Commission) in the Lower South West and Cockburn/Kwinana, known as WA NDIS My Way.

The NDIS is of significant interest to the Community Managed Mental Health (CMMH) sector which is reflected in a high level of engagement of sector organisations, consumers, carers and families. WAAMH has held two events for the mental health sector on the inclusion of psychosocial disability within WA's trial of the NDIS, attended by over 150 participants.

Extensive consultation with the CMMH sector has occurred through these events, in which the NDIS was a key focus. WAAMH also consulted the mental health sector via a survey that set out the key issues for people with psychosocial disability and proposed responses to these issues. More than 70 responses were received to the survey.

The results of these consultations have been documented by WAAMH in the position paper *“Psychosocial Disability Support through the WA NDIS My Way Trial: Key Issues and Proposed Responses².”*

¹ <http://mhaustralia.org/publication/providing-psychosocial-disability-support-through-ndis>

² <http://waamh.org.au/assets/documents/projects/psychosocial-disability-support-through-the-wa-ndis-my-way-trials.pdf>

This project proposal draws on learnings from the consultation process and endeavours to build the capacity on the ground in the WA NDIS My Way trial sites which have not yet been addressed by sector development initiatives. It reflects the input of WAAMH members and other stakeholders from consultation conducted by WAAMH in the Lower South West trial site in September 2014.

It is also strongly informed by the successful community of practice for psychosocial disability which has been established in the Hunter NDIS trial site by the Mental Health Coordinating Council of New South Wales³.

THE PROJECT - A COLLABORATIVE APPROACH TO CAPACITY BUILDING IN THE WA NDIS MY WAY TRIAL SITES – COMMUNITY OF PRACTICE

The project is to establish a learning network more commonly known as a community of practice (CoP) within the WA NDIS My Way trial sites. The CoP is defined by the process of shared learnings and information dissemination which occurs between stakeholders within the network as well as more broadly (e.g. to the wider community). In this case the focus of learning is the inclusion of psychosocial disability within the WA NDIS My Way trial sites and stakeholders would include mental health consumers, families and carers, community mental health and disability service providers (both Commonwealth and State), clinical providers, key government agencies and other key stakeholders (such as GPs and public mental health practitioners).

The CoP will create a space for these stakeholders to learn from one another as well as identify and build their resources to access WA NDIS My Way by investing in people and systems. The CoP will also provide an opportunity for stakeholders to alert the Disability Services Commission (the Commission) of key issues identified in the consultations which WAAMH has undertaken.

This process highlights the fact that building and investment in capacity cannot be undertaken in isolation. The CoP maximises collective knowledge, generates insights and ways of working, aids in solving problems and creating innovations⁴.

This proposal also adds value to the projects which have been funded through the National Disability Insurance Agency's (NDIA) Sector Development Fund (SDF), most specifically those activities which have been overseen by the Richmond Fellowship of WA. . The added value comes from taking on board the key learnings from these projects for the benefit of the whole system as adaptive work rather than just the technical solutions ("many silver bullets rather than one silver bullet").

³ <http://www.mhcc.org.au/policy-advocacy-reform/influence-and-reform/ndis-and-mental-healthpsychosocial-disability.aspx>

⁴ Mandell MP, Keast R, and Brown K "The Importance of a New Kind of Learning in Collaborative Networks"

KEY INTERFACES

Richmond Fellowship of WA (RFWA) received joint funding through the Commission and the SDF to develop and deliver targeted and customised information for people with a psychosocial disability. The CoP will provide an avenue for the distribution of this information as well as by informing that project about priority information needs (to be identified by the CoP). The project activities undertaken by RFWA will also provide a model of best practice using a developmental, co-production approach to information provision. Developmental Disability Western Australia (DDWA) is working with WAAMH to undertake a project which involves developing models of support for individualised planning for people with psychosocial disability. This work will be informed by the support needs identified from the CoP and will provide information on models of support to the CoP and its broader network.

WA Individualised Services (WAIS) is delivering intensive training to selected disability sector and mental health organisations to develop capacity to provide individualised supports. WAIS will be well-placed to provide feedback to the CoP regarding the information and training needs of mental health organisations in preparation for WA NDIS My Way. WAIS's project activities may also be enhanced by reciprocal information sharing with the CoP.

The CoP will also provide an opportunity for NDS's shared quality systems project, which involves mapping the Commission's Quality Assurance Standards against those of the Mental Health Commission and is being developed in collaboration with WAAMH, to be informed by and contribute to learnings of the participants in the CoP. Furthermore, there are synergies with the WA NDIS My Way Consumer Carer Project, a CoMHWA, ARAFMI (WA) and Carers WA initiative which aims to provide customised community management and capacity-building strategies for consumers and carers/families. Through this project, individuals will be upskilled to be able to participate meaningfully as informed members of the CoP. They will also represent the consumer and carer network's views, not just their own individual lived experience of the NDIS.

The CoP will be closely linked with the Commission's Information and Support Network (ISN), an internal unit established to keep all stakeholders informed, supported and connected to the WA NDIS My Way agenda. This will include ISN representation on the CoP, to help facilitate a central source of accurate and up-to-date information on matters pertaining to the WA NDIS My Way trial. Linkage with the ISN will be collaborative and two-way – the intention is to reduce duplication across engagement activity and encourage involvement and engagement across each other's' planned activities.

The CoP will also connect with and feed into the Commission's local advisory groups in the Lower South West and Cockburn-Kwinana (once operational). These groups have been established to provide advice and input to the WA NDIS My Way Reference Group on the implementation of the WA NDIS My Way trials.

KEY OUTCOMES

The purpose of this project is to establish a CoP to increase the knowledge and skills of relevant stakeholders to improve their responsiveness to the daily living support needs of individuals with psychosocial disability within the WA NDIS My Way trial sites.

The outcomes of this proposal are framed in line with and build on the key issues and proposed responses which were identified in WAAMH's consultations. The proposal takes a systems approach whereby there is recognition that all of these processes do not occur in isolation. They need to be understood within a community development context which incorporates the capacity building of all stakeholders, including both mental health and disability community sector services, government agencies, consumers, carers and families.

The key objectives of this project are as follows:

- joint learning and innovation from a networked CoP which encompasses mental health consumers, families and carers, community mental health and disability service providers (both Commonwealth and State), clinical providers, key government agencies and other key stakeholders (such as GPs and public mental health practitioners)
- effective interfaces are developed between the above stakeholders which result in an increased ability to understand and respond to the effective inclusion of psychosocial disability in the WA NDIS My Way trial sites.

Achievement of these objectives will be measured by reported increases in awareness, understanding, involvement and/or confidence among CoP participants of WA NDIS My Way. At the conclusion of the CoP, it is intended that participants will be able to report:

- an increased understanding of WA NDIS My Way and what constitutes reasonable and necessary supports in the context of psychosocial disability;
- an increased knowledge of how the concept of personal recovery aligns with psychosocial disability and the WA NDIS My Way planning and assessment processes;
- for CMMH and disability sector organisations (DSOs) to have, an increased understanding of the implications of WA NDIS My Way for service quality, access and financial sustainability;
- increased confidence in using the existing and any emerging quality safeguards systems of the Commission and the MHC in the context of WA NDIS My Way. .
- greater understanding of the interface between the public mental health system, providers, consumers, carers and family members in the WA NDIS My Way trial sites
- that the information provided by the CoP addresses participants' priority information needs in relation to psychosocial disability and WA NDIS My Way, as identified by participants throughout the CoP process.

- that CMMH Organisations and DSOs involved in the CoP report an intention to, or progress in, implementing organisational systems, structures and supports that effectively involve and support people with psycho-social disability in WA NDIS My Way;
- that members of the CoP report that they have disseminated, or plan to, disseminate information and learnings from CoP meetings amongst their networks and stakeholders (subject to the Commission's consideration);
- that the CoP has developed sustainable strategies to meet any identified ongoing sector information needs beyond the grant term.

WAAMH will develop a project plan, with support from the Commission's Funding Directorate, which will map a detailed schedule of activities and events planned for the CoP. Key components and expected outcomes of each event will be included in this plan, consistent with the outcomes identified above. It is also expected that a Terms of Reference will be developed for the CoP.

The project plan will be a component of the grant agreement between the Commission and WAAMH to enact this proposal, and does not need to be completed until the grant has been signed.

TIMEFRAME AND LOCATION

The establishment and implementation of the CoP will be for a period of 18 months and will cover the WA NDIS My Way trial sites in the Lower South West and Cockburn-Kwinana. The CoP will initially be established in the Lower South West site where it will operate from February 2015 to January 2016. A further branch of the CoP will commence in the Cockburn-Kwinana trial site, when it commences in July 2015. and continue to June 2016.

The same project officer will be responsible for secretariat support for both forums to ensure continuity. However, the provider and consumer participation will differ, depending on the location.

KEY MEMBER TARGET GROUPS

The target groups for inclusion in the CoP are all stakeholders in the WA NDIS My Way trial sites, inclusive of (this is not an exhaustive list):

- Mental health consumers, carers and family members;
- State and Commonwealth-funded CMMH Organisations, including Partners in Recovery consortium members;
- Public Mental Health Services;
- State and Commonwealth-funded Mental Health and Disability Sector Organisations;
- My Way Coordinators;
- Disability Service Commission, including ISN representation;

- Mental Health Commission;
- NDIA Sector Development Fund representatives (Richmond Fellowship, National Disability Services, WA Individualised Services)
- Other community stakeholders (local GP's, public mental health practitioners, employment providers etc.)

PROPOSED KEY TASKS AND ACTIVITIES

WAAMH proposes that this process is progressed by way of establishing a CoP and includes funding to employ a project officer, a recovery training specialist and a component of funding for targeted communication.

The key activities and deliverables are outlined in the table below. It is important to note that the community of practice concept is defined by the process of learning which occurs between and through each of the stakeholders involved which in turn is disseminated further afield. The learning process and interaction which occurs between members are activities and key deliverables in of themselves.

Key Activity	Key Deliverables
<ul style="list-style-type: none"> • Establish a CoP which includes mental health consumers, families and carers, community mental health and disability service providers (both Commonwealth and State), clinical providers, key government agencies and other key stakeholders (such as GPs and public mental health practitioners). 	CoP meetings occur at regular intervals, to be specified by the group, but are assumed to be bi-monthly for planning and budgeting purposes (six (6) meetings per site).
<ul style="list-style-type: none"> • Consultation and other forms of participation and engagement are undertaken by CoP members on the practical implications of including people with psychosocial disability in the WA NDIS My Way trial. 	Key learnings are shared with stakeholders external to the CoP, to further enhance understanding on how psychosocial disability fits within WA NDIS My Way.
<ul style="list-style-type: none"> • Series of workshops/forums to explore and analyse how WA NDIS My Way has been working on the ground for people with psychosocial disability and those involved in providing services to them. 	Series of implementation briefs explaining how WA NDIS My Way has been working on the group for people with psychosocial disability. Topics will ultimately be determined by the CoP, but may include areas such as:

Key Activity	Key Deliverables
	<ul style="list-style-type: none"> ▪ Core principles ▪ Communication ▪ Access and eligibility ▪ Planning supports and pricing ▪ Interface with other services ▪ Safeguards ▪ Capacity building <p>These briefings will focus on areas which can be realistically addressed by CoP participants in the trial sites (e.g. the NDIS eligibility requirements are defined in legislation therefore cannot be realistically influenced by the CoP. However the implementation briefs may provide an opportunity to clarify how these requirements are being met in the trial sites for people with psychosocial disability and the evidence required by trial sites for them to be met in practice).</p> <p>Learnings will be captured through briefings and disseminated to CoP participants, including line agencies, and to the mental health and disability sectors more broadly.</p> <p>Broader publication and dissemination of information beyond the CoP will be subject to Commission’s consideration of the implementation briefs on a case-by-case basis.</p>
<ul style="list-style-type: none"> • A structured training workshop on “Recovery, Personalised Support and WA NDIS My Way” is delivered to all CoP participants. 	<p>A common understanding of the application of recovery principles and how these relate to WA NDIS My Way is reached and disseminated beyond the CoP.</p>
<ul style="list-style-type: none"> • Explore and analyse the interface between the public mental health system, providers and consumers in the WA NDIS My Way trial sites with a view to clarifying boundaries, responsibilities and relationships. • Clarify the supports that are within and outside NDIS My Way funded supports. 	<p>The interface between the public mental health system, providers and consumers, and the challenges and learnings associated with this, are understood by CoP participants.</p> <p>Supports within and outside of WA NDIS My Way are defined, understood and disseminated.</p>

Key Activity	Key Deliverables
<ul style="list-style-type: none"> Use information and analysis produced by the CoP to inform research, practice development and policy action of all CoP participants, including consumers, family members and carers, particularly in relation to the challenges and changes associated with WA NDIS My Way. 	<p>CoP briefs/summaries are drafted and distributed to CoP participants which highlight the most significant areas of change observed by CoP participants, so that organisations are well-equipped to respond to these changes.</p>
<ul style="list-style-type: none"> Develop and implement a communication plan for the learnings coming out of the CoP which will include the activities of promoting, community building, creating and curating. 	<p>Communication plan developed and implemented inclusive of feedback loops and distribution of learnings from the CoP; and</p> <p>Communication formats and channels established.</p> <p>Dissemination of information beyond the CoP will be subject to Commission's consideration.</p>
<ul style="list-style-type: none"> Develop sustainable processes for maintaining the CoP if there is a demonstrated need for it to continue beyond the grant term. 	<p>A self-sustaining sector response is planned and implemented, independent of Commission funding.</p>