

Child & Adolescent Mental Health and Addiction Sector Day

Auckland 28 March 2008



Overview

Background

Review of closed cases

Goal Attainment Scaling

Other Activities

Australia-New Zealand complex needs forum

Discussion



Background

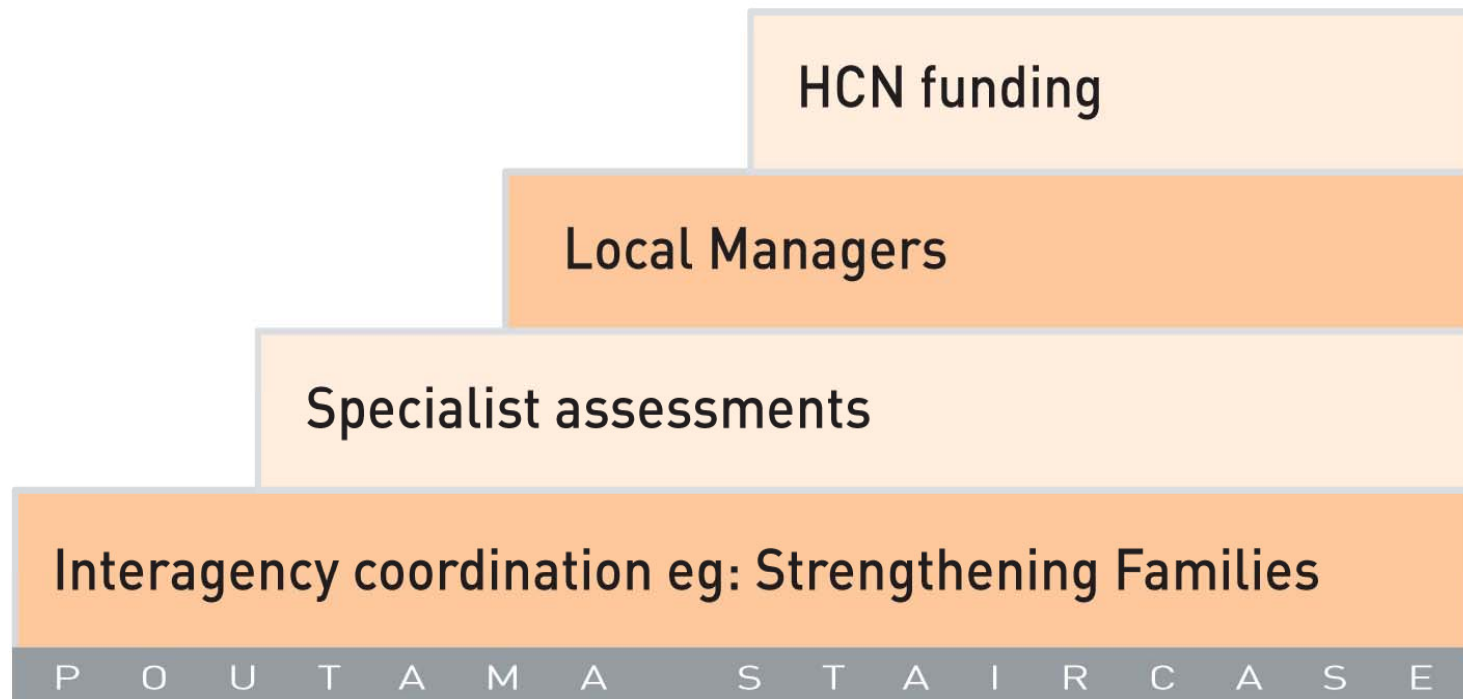
HCN Interagency Strategy

- fosters collaboration between agencies
- improves service delivery effectiveness
- builds agency capability

effective collaboration makes a positive and essential difference to the lives of children and young people

an interagency team of professionals and family/whanau working together on one plan to improve wellbeing

Steps to HCN funding



P O U T A M A S T A I R C A S E

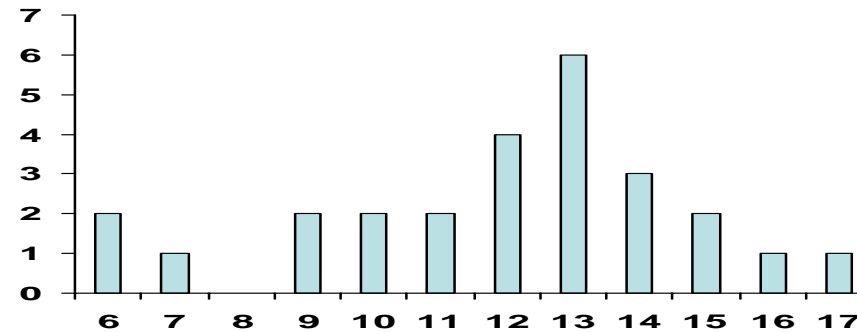
Review of closed cases

Methodology

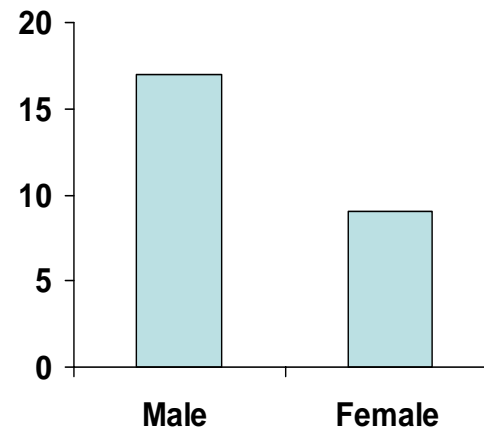
- 26 closed cases identified
- Data base accessed for coding information and Panel concerns and total expenditure
- Goal achievement scored: 0 to 2
- Plans checked for :
 - shared working hypothesis
 - SMART goals
 - measurable outcomes
 - robust interventions
- Inter-reviewer reliability checked for 2 files

Demographic information - n 26

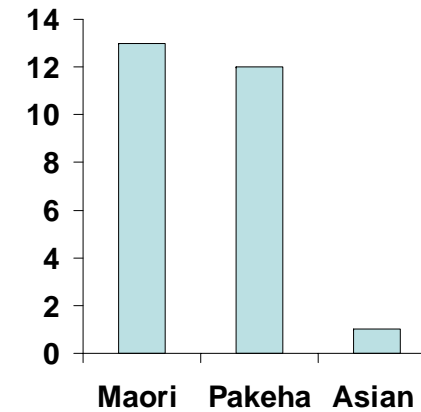
Age at application



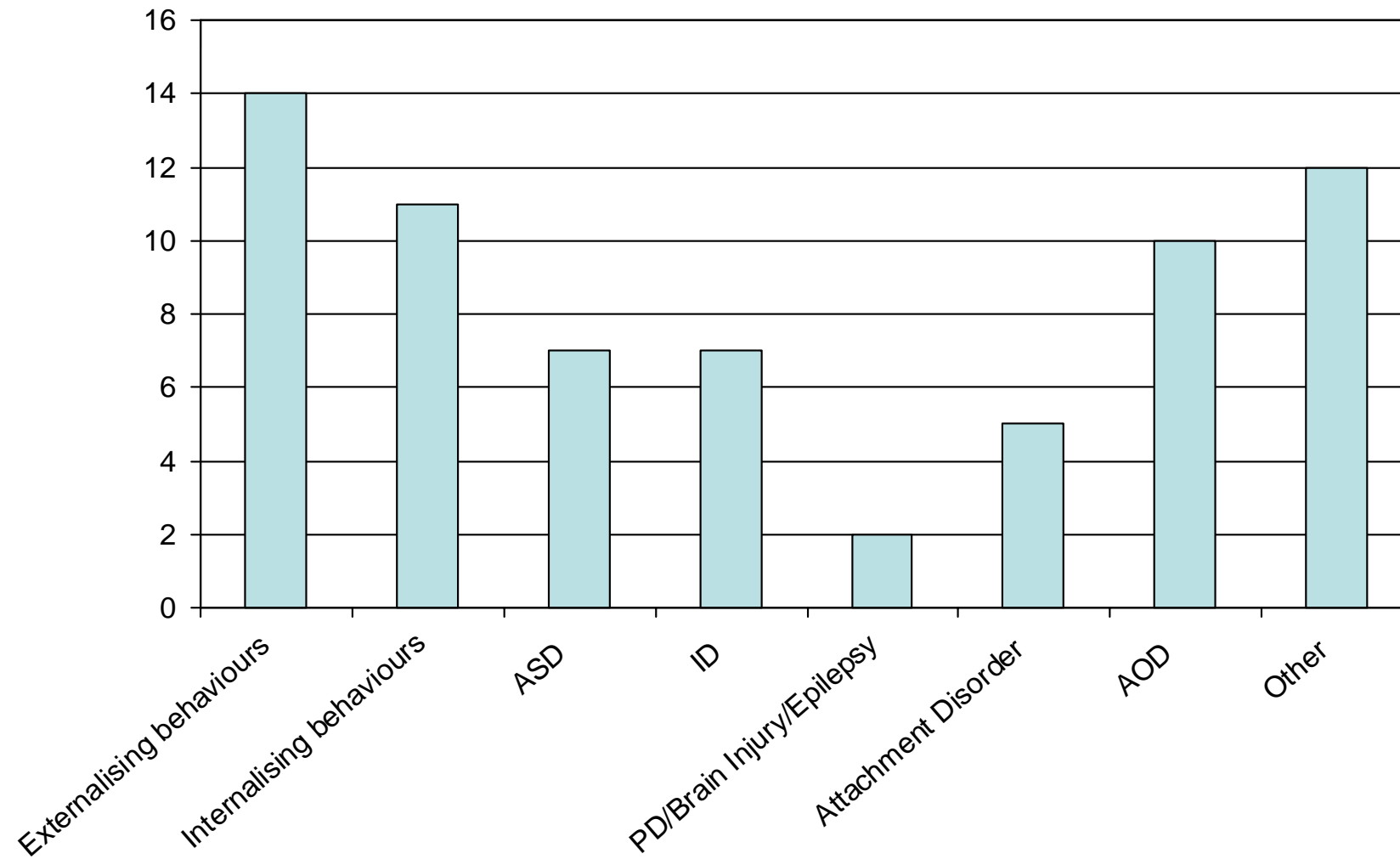
Gender



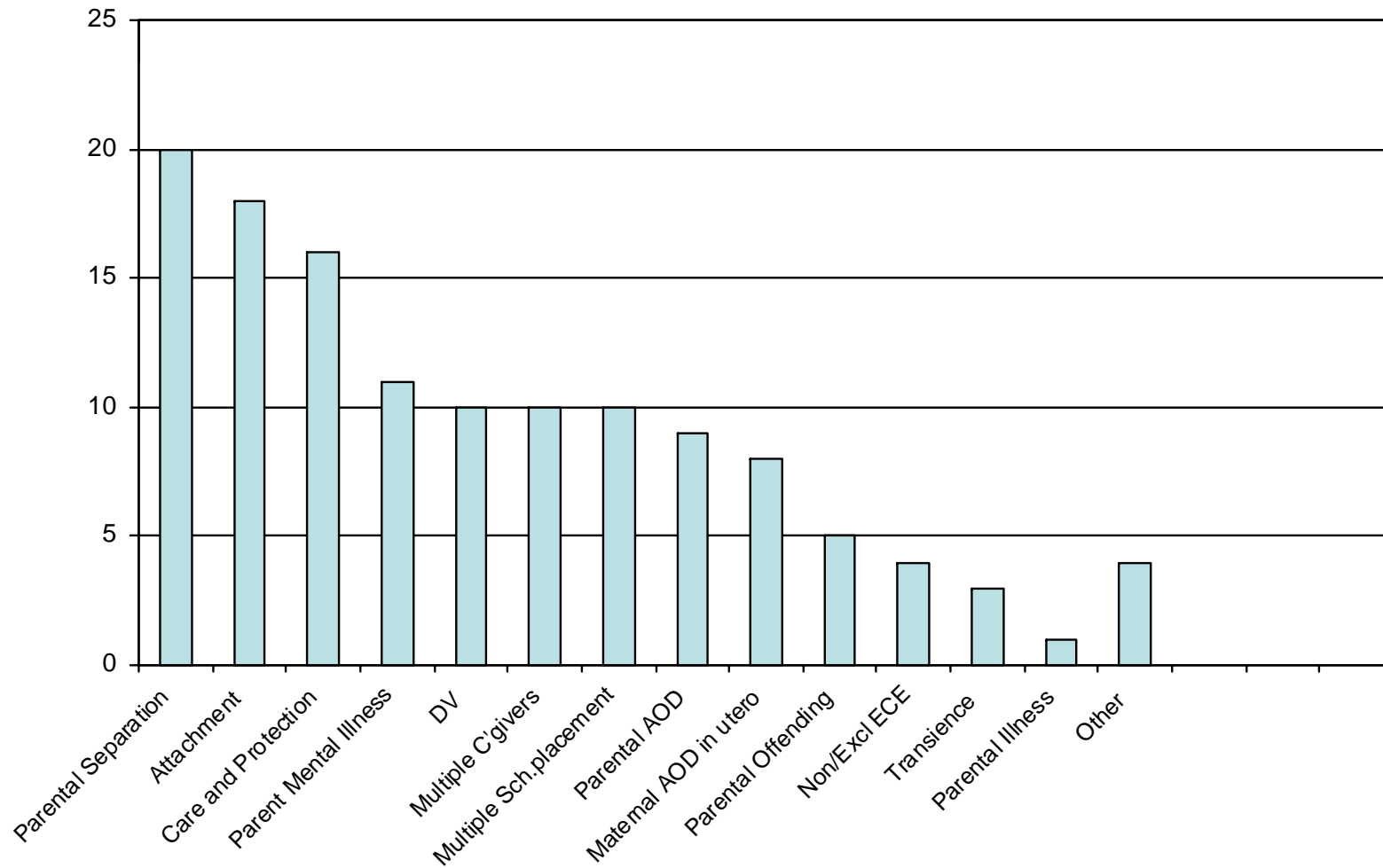
Ethnicity



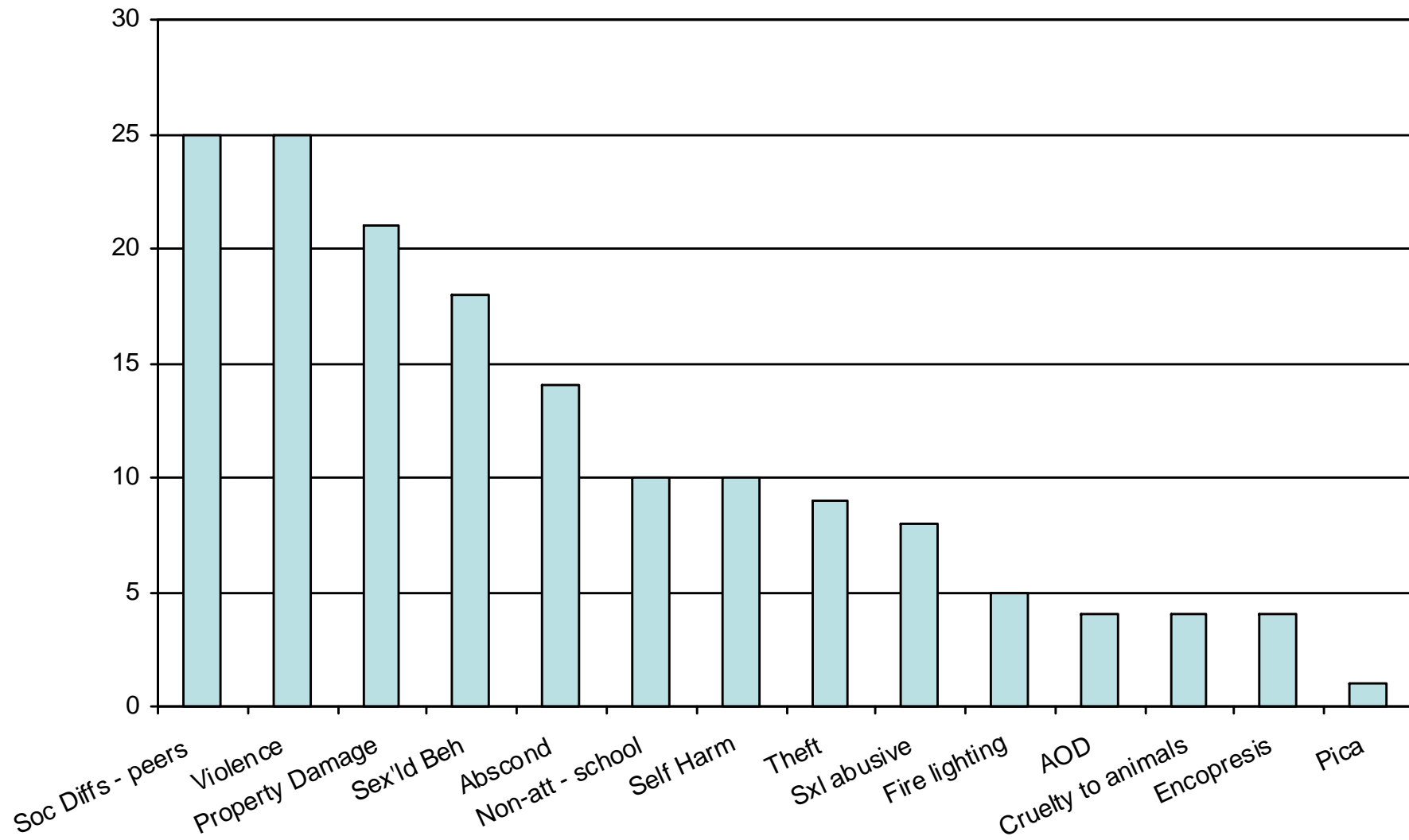
Diagnoses (n = 26)



Adverse Life Experiences (n = 26)



Presenting Behaviours (n = 26)



	Poor attachment	Parental separation	Abuse/neglect	Domestic violence	Multiple carers	Parental MH issues	Multiple schools	Parental A&D	Maternal alcohol
Violence	18	18	14	11	10	9	9	9	8
Difficulties with peers	18	19	14	10	9	9	9	9	8
Property damage	15	15	11	8	8	7	7	8	8
Sexualised behaviour	14	13	11	9	6	6	6	5	6
Absconding	4	13	9	7	6	6	5	8	5
Theft	12	9	5	4	5	3	4	4	2
Non-attendance	6	7	10	5	6	5	5	5	3
Cruelty to animals	4	4	3	3	2	3	2	2	2

Highest number of goals achieved

Gender	Ethnicity	Age at application	Number of plans	Cost of interventions
Male	Maori	12	2	\$32, 856 to \$133,484
Male	Pakeha	13	2	
Female	Pakeha	10	3	
Female	Maori	6	4	
Male	Pakeha	9	2	



Lowest number of goals achieved

Gender	Ethnicity	Age at application	Number of plans	Cost of interventions
Male	Maori	13	1	\$43, 265 to \$113, 964
Male	Pakeha	17	1	
Male	Maori	14	1	
Female	Pakeha	13	2	

Case Study

Age: 6 years

Diagnoses: disorganised attachment disorder, ASD

Adverse Life Experiences: poor attachment, parental separation, parental mental illness, parental AOD

Presenting behaviours: Physical aggression, property damage, theft, oppositional behaviours, sexualised behaviours, social difficulties with peers

Agencies: Health and Education

Unmet Need: Service level shortfall, restricted access due to school exclusion and lack of capacity of CAMHS to provide therapeutic therapy

Case study....

3 years of funding:

\$102,573 – Intensive family therapy, supervision and training from attachment specialist for team members, respite care, mentor, teacher and teacher aid – special nurture group at school

\$86,915 – Engagement of Specialist Caregivers, intensive therapy, supervision and training from attachment specialist, respite care, mentor, teacher and teacher aid

\$57,909 – Ongoing therapy, reduced respite care, reduced intensity of teacher time, teacher aid.

Case study...outcomes

- 9 year old
- with permanent caregivers
- attending mainstream school/classroom - participating in team sport
- diagnosis of ASD revised
- developing normally

What works?

- active and informed engagement of the child or young person and their family /whanau / caregivers
- active engagement across agencies by experienced and solution focused practitioners
- support for practitioners from managers
- early and full analysis of the factors impacting on the child or young person
- shared understanding of the issues and interventions to be implemented
- clear goal setting with detailed planning

What doesn't work?

- lack of active involvement from all agency managers
- lack of informed engagement from the child or young person and their family /whanau/ caregivers
- lack of analysis
- inexperienced staff working with the hardest cases
- unilateral plans that do not address the needs of the child or young person across all aspects of their life
- focusing on resources rather than interventions and outcomes
- not addressing the ghosts in the cupboard
- Services Coordinators unfamiliar with the work

Goal Attainment Scaling

- provides a framework for teams to identify goals across multiple performance domains
- breaks goals down into small steps to support objective measurement of progress
- is consistent with client and family centred practice
- can be applied to all cultures
- can be used to complement standardised measurement tools

‘A direct, reliable and accurate method of assessing treatment induced client change.’

McLaren and Rodger 2003

What does Goal Attainment Scaling look like?

Much more than expected

More than expected

Goal

Less than expected

Much less than expected

Sylvie will transition to high school without regression in behaviour

Much more than expected S will access usual school systems to support her maintain appropriate behaviours

More than expected With support S will regularly exhibit appropriate and positive behaviour in her new school

Goal S will transition her current skills to the new school

Less than expected S will exhibit unpredictable behaviour that requires intensive management by the new school

Much less than expected S will exhibit unpredictable behaviour that puts the stability of her new school placement at risk





Goal Attainment Scaling Project Timelines

- Pilot and workbook development July/August 2008
- Engagement of Advisory Group to be confirmed
- Evaluation September 2008
- Roll out of training package Oct 2008 on

Other activities for this year

- Training Analysis
- Managers Forum – April 11 2008
- Services Coordinators Forum – Oct 2008
- Practitioners Forum – Oct 2008
- Presentations to Sector Managers - underway
- Services Coordinators Regional Forums - continuing



Management Forum - 11 April 2008

Goal Attainment Scaling

Application Panel

What's working well

Resources for Managers

What you want us to know



Australia –New Zealand Complex Needs Forum

26/27 February 2008

Expert professional input to guide teams



Discussion

More information available on:
www.hcn.govt.nz





Getting the...
better at working together
resources

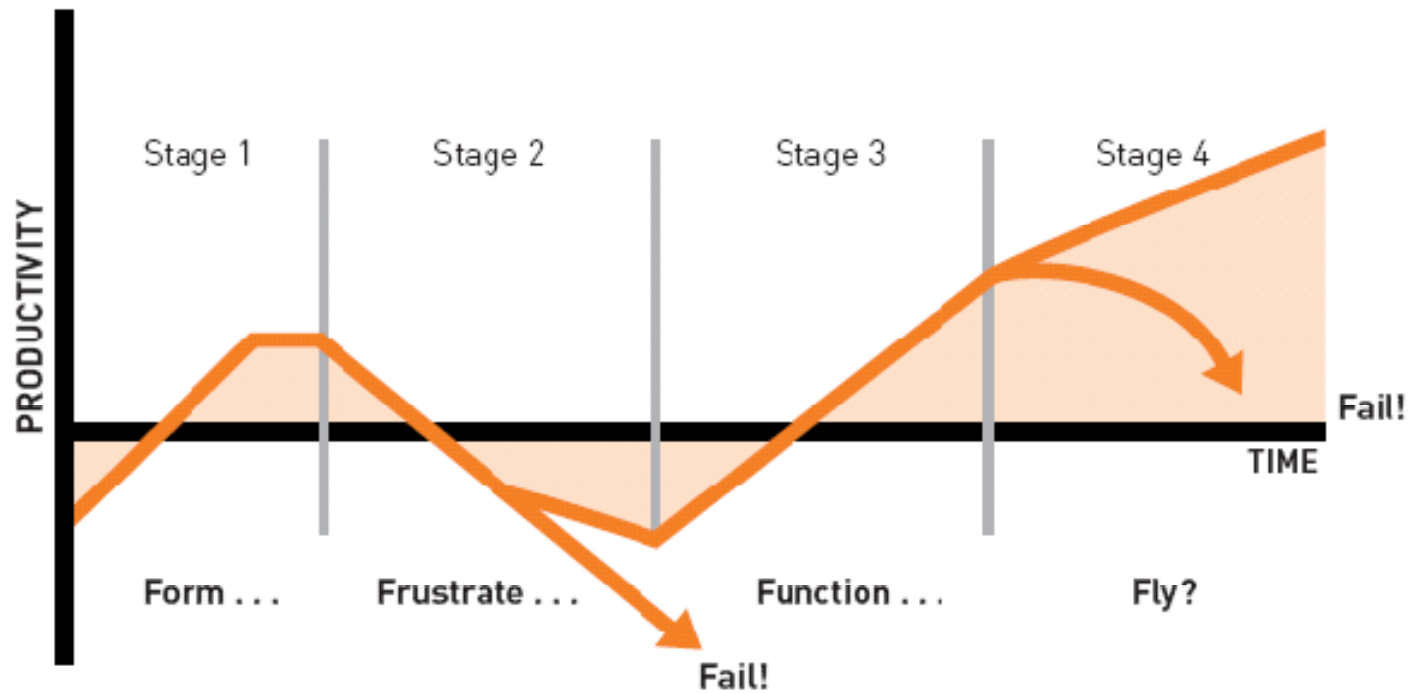
Understanding how they can help



It's not easy



Advice on good practice



HCN Unit experience

- Good collaboration practice in places but not generalised
- An over-reliance on individuals that is not sustainable

What are the resources?



Literature review

Advice on good practice

Self assessment tool

STAGE 4: UNDERTAKING THE SELF-ASSESSMENT

Group members will need to become familiar with the self-assessment material in advance. Although members can read the material and carry out the exercise individually if time permits, or it is difficult to bring people together, it has proved to be more effective to work through the exercise as a group.

Group members are asked to consider a series of statements, listed under each of the six principles for collaboration about the interagency group that is the subject of the assessment, and to indicate the extent to which they agree or disagree with each of the statements by ticking the appropriate box in the rapid collaboration profile. It is important that members also consider what lies behind the statements before responding. An explanation of each of the statements is set out under each principle in Section 3, The Collaboration Principles, from page 25. Members may wish to make additional comments or observations, and the 'Notes' column in each rapid collaboration profile sheet allows for this.

After responding to the self-assessment statements for each of the six principles, group members score their responses as follows:

Strongly agree	4
Agree	3
Disagree	2
Strongly disagree	1

Some groups might feel that it is inappropriate to score their responses in this way, and if this is the case, it is still worthwhile for a group to undertake the self-assessment and to have a discussion about members' views. The discussion is more important than the scoring.

Once the following rapid collaboration profile sheets have been completed for each of the six principles, the group should meet on to Stage 3 and Stage 4 of the self-assessment tool, which covers the analysis of findings and feedback, and action planning (pages 15 and 21).

RAPID COLLABORATION PROFILE SHEETS

PRINCIPLE 1: Recognise and accept the need for collaboration

To what extent do you agree with the following statements about the interagency work that is the subject of this self-assessment exercise?

	Strongly agree	Agree	Disagree	Strongly disagree	Notes
A. The agencies (or group members) I have worked collaboratively in the past and have had significant success as a result					
B. The factors associated with successful interagency working are known and understood					
C. The principal barriers to successful collaborative working are known and understood					
D. The voluntary or required basis of each group member's involvement in the collaborative process is recognised and understood					
E. There is a clear understanding of the interdependence of members in achieving some of their goals					
F. Members understand the ways where they can achieve their agency goals by working independently					
Scores					Total

Scoring key: Strongly agree = 4, Agree = 3, Disagree = 2, Strongly disagree = 1

Self-assessment tool

- 6 principles - 36 questions
- score
- discuss
- action plan



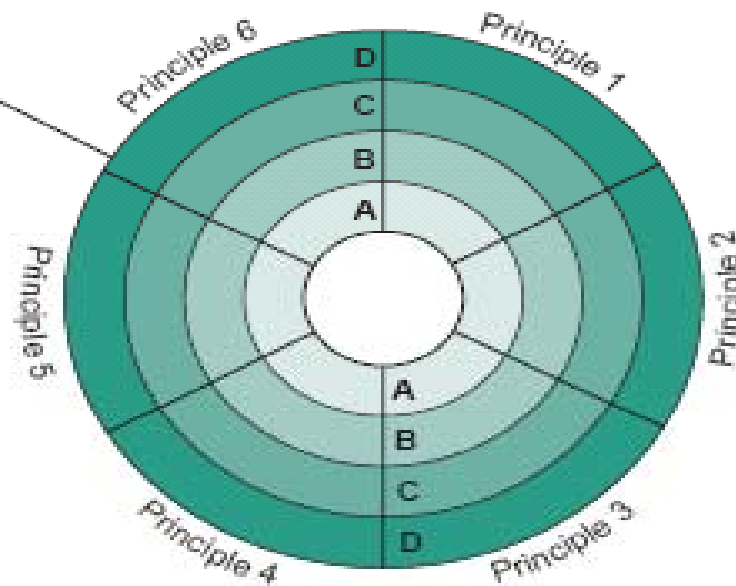
6 principles

- recognise and accept the need for collaboration
- be clear and realistic about the purpose
- ensure commitment and ownership
- develop and maintain trust
- create clear and robust arrangements to support collaboration
- monitor, measure and learn.

Scoring self assessment

Put total score for each principle in appropriate segment below and shade in that segment

- A 19-24
- B 13-18
- C 7-12
- D 6



AGGREGATE PROFILE SCORE =
 (Total of all six principles)

Date:

Take-away points

The basics aren't hard but they need to be done right:

- be clear about why collaborating
- agree the processes up front
- put the right people at the table
- reassess annually
- when the going gets tough...
 - show leadership
 - focus on the child or young person
 - be flexible *build a bridge not a wall*