

Pilot Workshops

Mental Health Professionals Network (MHPN) pilot workshops were conducted at:

- Bathurst on 13 November 2007 and 30 June 2008
- Launceston on 26 November 2007 and 8 July 2008
- Newtown (Sydney) on 28 November 2007 and 9 July 2008
- Elizabeth (Adelaide) on 4 December 2007 and 16 July 2008.

Participants across the pilot group sites represented all the professional groups included in the Better Access initiative; psychiatrists, general practitioners, psychologists, mental health nurses, paediatricians, occupational therapists and social workers.

Key Outcomes

The pilot workshops yielded consistent and positive feedback with an intention for all groups to continue meeting. Four main conclusions can be drawn from the post-session evaluation questionnaires.

1. *All participants consistently rated the pilot workshops as being a valuable experience*

Feedback indicated that participants valued the opportunity to be involved and that the facilitation of the sessions was of a high standard.

Suggestions from participants for improving the sessions generally related to issues such as more equal representation of professional groups rather than content or facilitation of the session.

2. *Feedback from the post-session questionnaire consistently indicated that the materials met the needs of the pilot groups*

In particular, the case studies promoted discussion about referral and networking issues rather than just focusing on illness-specific issues. Attendees indicated that the case studies were of a high standard.

Suggestions for improvement tended to highlight the need to include details of resources specific to the geographic area in which the workshop was run.

3. *Participants identified a number of benefits likely to emerge from the workshops and overall project*

The benefits include:

- improving referral networks
- building better understanding of the roles of other mental health professionals
- improving access to local resources
- exposure to more up-to-date clinical knowledge
- the anticipated ability to make more efficient and appropriate referrals.

These flow-on effects appear likely to improve outcomes for clients and to provide opportunities for greater collegial support and collaboration.

4. *The vast majority of participants indicated that they would like to continue involvement in a MHPN group and would recommend the groups to other colleagues*

The statement above combined with the fact that relatively few participants had prior involvement in a multidisciplinary collaborative care network highlights a need that exists within mental health services and professions.

On the basis that the collective response of the pilot groups indicated successful outcomes on a number of measures it was concluded that setting up MHPN groups is viable and desirable across Australia. It also appears that relatively small changes can be made to considerable effect with regard to relevant content for local areas.