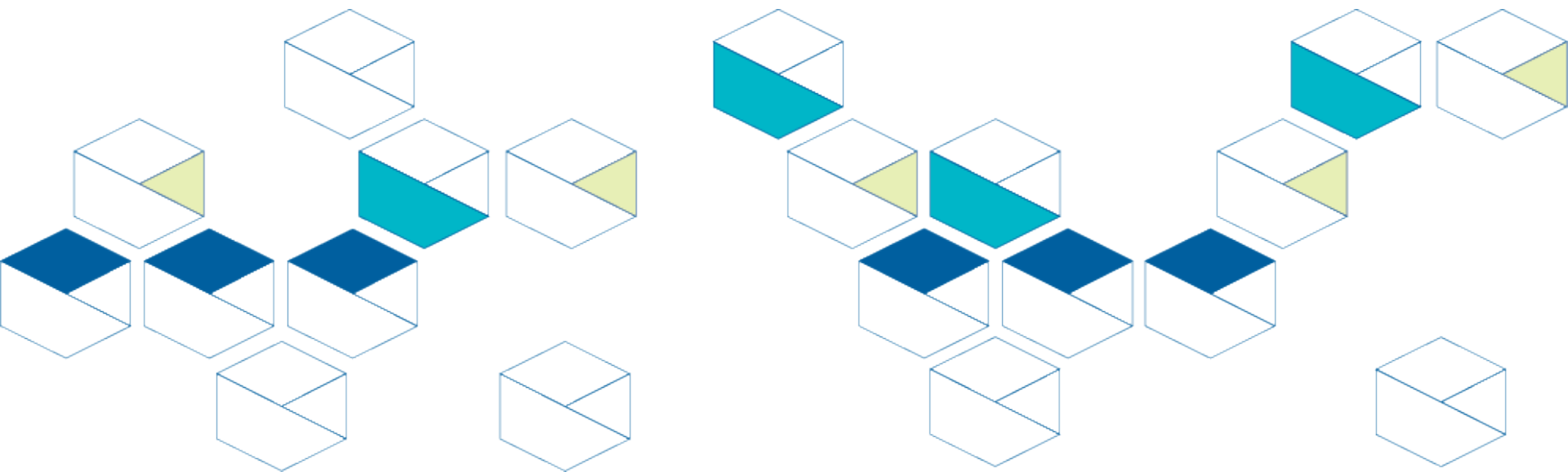




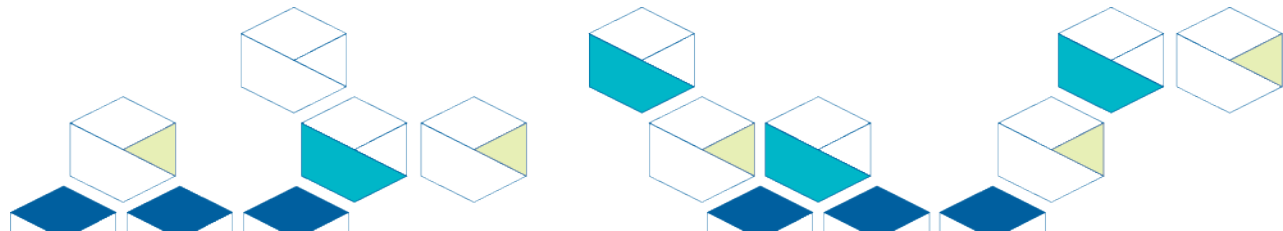
She's a Legend!

How service integration,
Legend and carer focus
supports “A Contributing Life”



Acknowledgement of Country

“We would like to begin by acknowledging the Traditional owners of the land on which we meet today, the Boon Wurrung and Wurundjeri People of the Kulin Nation. We would also like to pay our respects to their Elders both past and present.”



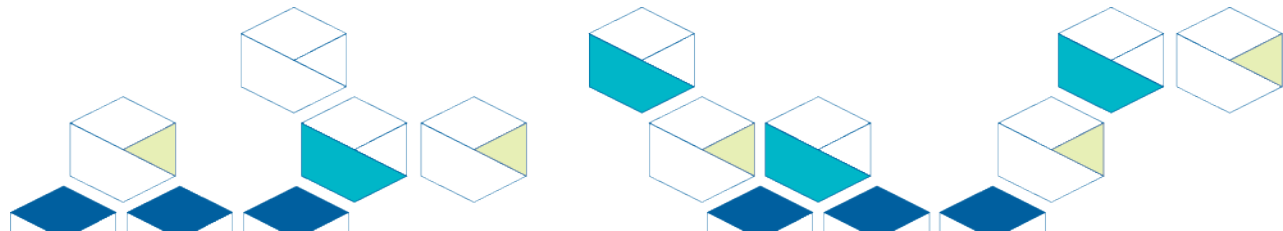
Department of Health

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Adversaries in a time of change

4th National Mental Health Plan

(2009-2014, Priority 1: Social inclusion and recovery)

Establishment of the WA Mental Health Commission in 2010

“Outsourcing” specialist MH rehabilitation services

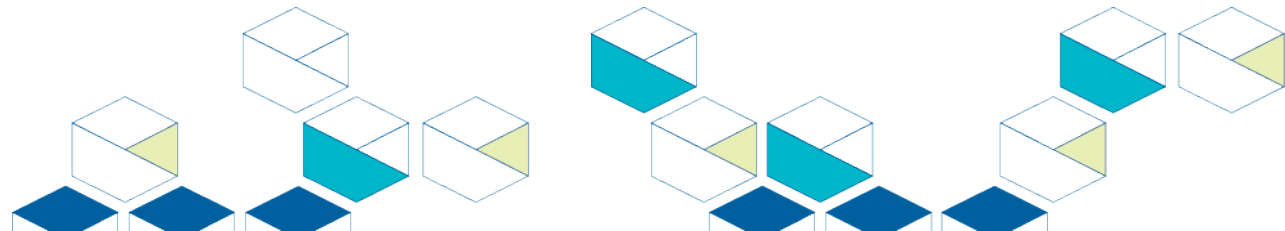
Reallocation of funds to CMOs to provide recovery-based services

Mutually antagonistic views of the others’ services and capabilities

Muddy KPIs & outcome measures;
reluctant organisational and corporate changes

Thrown together

- “100 Homes”, or: Individualised Community Living Strategy (ICLS)
- MH & CMO’s support ICLS consumers in a recovery-based, individualised plan
- Just like NDIS, but with housing!



How we have changed...

Perth Home Care Services (10 years ago)	Avivo: Live Life (now)
Vision: People living at home with dignity	Vision: A country whereby people live as valued citizens, making their own decisions, developing their abilities and growing in their relationships
Purpose: Providing home and community care	Purpose: Work in partnership with people and families to develop and provide the supports and services they choose to live life

How we have changed...

Perth Home Care Services (10 years ago)	Avivo: Live Life (now)
<p>Way we see the world:</p> <p>Care and support for the person</p> <p>We are in charge and know what is best for the person</p> <p>Key question: What is important for the person?</p>	<p>Way we see the world:</p> <p>Development of capacity; families, friends and communities; recovery; autonomy; self-direction</p> <p>We work together with the person and the people that are important to them to develop and provide the supports they choose to live life</p> <p>Key question: What is important to the person and their family/carers?</p>

How we have changed...

Perth Home Care Services (10 years ago)	Avivo: Live Life (now)
Funding: Block funding from government	Funding: Consumer directed funding (note this is how much of Mental Health support is funded) will be under NDIS
Service activities: Cleaning, shopping, care	Service activities: Training and development
KPIs: Number of people and hours of service	KPIs: Outcomes – health, home, purpose, freedom, community, love, money, help

We used to *tell* people what they needed...



Now, we *ask* people what they'd like to live life.



Kerry's story



Hi, my name's Kerry and this is my story

I was living with my dad. I'd put my name down for Homeswest. I used to check the mail box every day. After a while I received the letter that I'd been accepted and moved out of my dad's into a one bedroom flat in Bentley. I had plans to save and buy beautiful things. I met the neighbours; they asked me to come down for a drink (alcohol). I went down to the courtyard and they were all telling jokes & getting drunk. I would drink heavy with the neighbours then spiral out of control and have to be hospitalised.

I wasn't eating well, just noodles or toast, so I had enough money for alcohol every night. This went on for 10 years. We had a lot of laughs and good times but usually I was sad because I wasn't living the way I usually did like at dad's: going shopping at Big W or K-Mart and eating healthy meals. I was working and it still wasn't enough money.

I said to my case manager at Mills Street I'm unhappy and sad, I really have nothing and I don't want to be there anymore. I want better for myself, I'd had enough. My case manager said they've just brought out a new program "Hundred Houses for the Mentally Ill". I had an appointment and got accepted in 22 weeks. I was in a three bedroom house with supports. I had to do goals, things that I couldn't do myself.

Kerry's story continued...

I was cancelling supports and lying, saying I was sick. I was reminded on a weekly basis that if I didn't work on goals I'd lose my house. I didn't like my house, it was all brown – floors, carpets, benches in kitchen and I was ashamed. I asked for a transfer. I had a meeting with the Mental Health Commission. They agreed it would be in my best interest for a transfer and I got another house near Fremantle.

When I first went on the program I was looking up groups that we could do together and other goal things. We had to research it ourselves and sometimes I was stuck as to what to do so we'd go for a walk. I had a boss at Avivo who is a team facilitator, she would check in on me. I had really nice birthdays and on Christmas day or eve I had a support so I had a good day. I'd call Traci and my mum and dad on a regular basis and relay what I'd done or was working towards.

Now days Traci is emailed and so is mum. Dad died. If I get hospitalised, when I go home there are extra supports in place and there's a discharge meeting where Avivo, Traci and mum all have a say on their concerns and then OK if I'm discharged

Kerry's story continued...

I don't have to work on goals anymore but I still have my goals I work on anyways. Things are so much better since I moved. My home is brick and tiled (white), and it's 3 bedroom, 2 bathroom. I have 3 cats: Tom Tom, Soody and Romeo; and I work on improving my life each day with my support workers.

I eat much better now and I don't drink anymore. The supports and the program is a great opportunity to go out there and give it a go in your community or for yourself. I feel I've achieved a lot since I started the program and I know that it's to help me and that I'm in charge of my progress and that Avivo is here to support me.

I love waking up in the morning and thinking what am I going to achieve today, or how can I help myself to do better. That makes the difference in life: wanting to be your own friend, and giving it your all

Kerry's mum – Lavina

- *When Kerry was released from hospital there was nothing in place to help take the steps required to fully recover. Things were overlooked. Just little things like she would be discharged on an off pay week so there would be no money for food or transport until the following week. Or her power would have been disconnected*
- *Kerry chose Avivo for her supports and had a case manager from the hospital. This in itself did not ensure a successful outcome. For the first few years to say it was a nightmare would be an understatement*
- ***Family involvement in the care in and out of hospital is a must***
- *Finally, we started to have meetings with everyone involved*
- *Communication with Kerry's team of people is imperative for a successful outcome. There needs to be mutual respect for each member & trust by all. This ensures that Kerry is surrounded by people who are telling her the same message as opposed to everyone going off on their own tangent*
- *All team members are aware of Kerry's triggers and signs that she is becoming unwell. When Kerry is becoming unwell she goes downhill very quickly. If I have concerns I can touch base with Tracey or Avivo to see if they have noticed that she is becoming unwell*
- ***Finally, I would like to add that my daughter is a beautiful human being, who happens to have a mental illness***
- *As I am so far away from Kerry, I know that Kerry is not just another case number to her support team. She is recognised for the wonderful human being that she is.*



Voice 002.m4a

Questions