



INTALINK THERAPY SOLUTIONS

Government Consultation Day with
Social Workers and Occupational
Therapists

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Intalink Therapy Solutions

- Established in May 2008
- Philosophy to provide an integrated Allied Health Service providing Mental Health and Paediatric Services
- Focus: children, adolescents, adults & families
- Special Interest in children and adolescents with special and complex needs including:
 - Behavioural problems including ADHD, CD, ODD
 - Complex Mental Health Issues
 - Autism Spectrum Disorders
 - Substance Abuse
 - Complex trauma including Domestic Violence and Sexual Assault
- These Areas identified as high need in the community



Identification of Areas of Need

- Extensive consultation with local providers including Paediatricians, Psychiatrists, GP's, Health Services, Community Services
- HRDGP Allied Health Needs Analysis of the Division in September 2008 identified a ***priority need for Social Workers in the area*** and wrote in a letter of support for Intalink '***their innovative approach will enhance patient care and meet the need for adolescent care***'

Professional Background of Partners: Fay Keegan

- 30 years Social Work experience
- 24 years rural Social Work experience
- Experience in Public, NGO and Private Mental Health Clinical services including:
 - ARAFMI – first employed Social Worker in 1980
 - NSW Association of Mental Health Support and Advisory Service – Sole SW
 - Member of Initial Steering Committee to establish Alzheimers Association in 1981 -1982
 - Public Inpatient and Community Health MH experience
 - Established Sexual Assault Service in Taree
 - Established private Occupational Rehabilitation Service in 1987 under Workcover
 - Clinical supervision roles in Child and Family and Relationships Australia; Senior Mental Health Social Worker Manning Health Area
 - Ten years experience in Private practice

Professional Background of Partners:

David Keegan

- Twenty nine years experience as Medical Practitioner
- Twenty four years experience in rural General Practice
- Special interest in Paediatric and Adult Mental Health
- Additional roles at times with local area health:
 - Week-end on call for Paediatric Inpatient Unit
 - Several years on weekend roster for Mental Health Inpatient Unit
 - Several years also employed by Newcastle University to teach undergraduate medical students in Taree
- Previous experience on the Board of Hunter Rural DGP
- Councilor Greater Taree City Council

Development of Service

The developmental side of establishing our service has taken an enormous amount of personal commitment over the past two years:

- We have successfully submitted for NRRHIP funding to establish the Allied Health Paediatric Service & managed over \$260,000 plus GST of project moneys over the past year involving major building works and resource acquisition;
- We have successfully gained accreditation as Panel Providers under the Helping Children with Autism Funding;
- We have recruited and retained highly qualified staff.
- We have committed many hours to policy and procedure development to meet all the legal and mandatory standards required.
- We have researched business models and systems and purchased software resources; computer systems; telephone systems; therapy resources; assessment resources.

Social Work Staff

- Barbara Squire joined Intalink in July 2008 and has nineteen years Social Work experience including:
 - Sexual Assault Counselling
 - PANOC
 - Mental Health Counselling, Taree & Forster Community Health
 - Domestic Violence Counselling/Support Co-ordinator
 - Counsellor Chemical Dependency Unit, Royal Women's Hospital Melbourne

Social Work Staff

- Peter Little joined Intalink in January 2010 and has fifteen years Social Work experience including:
 - Clinical Coordinator with Relationships Australia
 - Private Mental Health Practice
 - Development and provision of Social/Life Skills programs for Secondary Schools
 - School Social Work with a pool of 43 primary and secondary schools providing counselling and critical incident intervention and management
 - Community Health Counselling with children, adults and families

Where is Intalink?

Intalink is in Taree on Mid North Coast of NSW

Demographics of our area based on 2006

Census and ABS data :

- Population of immediate Greater Taree City Council Area 45,145
- Indigenous population 1,928 - @ 4%

Taree is in the Federal Electorate of Lyne

Demographic Profile of Lyne

2006 Census Data indicated –

- 3rd highest in Australia for % of households with income <\$650 p/w (35.6%)
- 3rd poorest (after Cowper to immediate north and then Hinkler)
- 3rd highest national unemployment rate
- 3rd lowest in level of education

Taree and environs also appear in ABS figures in the group of poorest postcode areas in Australia

Client Profile

- The population of clients we service include some of the most disadvantaged and marginalised individuals and families in Australia.
- Range in age from babies (Paed Physio Service) to 93 years old
- Mainly reside in Greater Taree City Council, Great Lakes and Gloucester Council areas (est area pop <100th)
- Clients also live in Newcastle, Port Macquarie and Camden Haven areas

Common Presenting Issues

Adults

- Depression & mood disorders
- Anxiety disorders
- Post-traumatic stress disorder
- Adjustment disorders
- Psychosis
- Loss and Grief
- Personality Disorders

Children & Adolescents

- ADHD
- ODD & CD
- Autism Spectrum Disorders
- Anxiety
- Depression
- Attachment disorders
- Loss & Grief
- PTSD and Trauma including Sexual Assault and DV

Psychosocial Issues

Include

- Low income and poverty
- Low levels of education
- Unemployment and underemployment
- Housing issues
- Violence/Abuse
- Substance Abuse

Service Delivery: Model

- Our model of service delivery and extensive experience of our Accredited Mental Health Social Workers and Psychologists has enabled us to engage with clients who may not have continued to access other service delivery models.
- Clients, particularly children and adolescents, respond positively to attending a multidisciplinary service – removes the stigma of accessing a service identified solely as a ‘Mental Health Service’
- Flexibility of service delivery to meet needs of clients

Service Delivery: Clinical Mental Health Services

Focus Psychological Strategies provided include:

1. Psycho-education (including motivational interviewing)
2. Cognitive-behavioural Therapy including:
 - Behavioural interventions
 - Behaviour modification
 - Exposure techniques
 - Activity schedulingCognitive interventions
 - Cognitive therapy
3. Relaxation Strategies
 - Progressive muscle relaxation
 - Controlled breathing
4. Skills training
 - Problem solving skills and training
 - Anger management
 - Social skills training
 - Communication training
 - Stress management
 - Parent management training
5. Interpersonal therapy (especially for depression)

There is also flexibility to include narrative therapy for clients of Aboriginal and Torres Strait Islander descent.

Service Delivery: Staff

Employ nine professional staff (Paediatric Physiotherapist currently on maternity leave) and four administrative staff:

- 3 Accredited Mental Health Social Workers (2 FTE) – *4 SW prior to budget*
 - One Social Worker has returned to work with NSW Health since Budget
 - 2 Psychologists (1.4 FTE)
 - 1 Paediatrician 3 – 4 days month
 - 1 Paediatric Occupational Therapist FT
 - 1 Paediatric Speech Pathologist FT
 - 3 Administrative staff 2 FTE
 - 1 Business Manager 0.4 FTE
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- Paediatric team accredited with FaHCSIA to provide services under the Helping Children with Autism Service.

Service Delivery: Accessibility

- Since May 2008 we have provided a total of 7641 individual occasions of service (to 31 May 2010) :
 - 80.4% have been under Medicare
 - 21 % Bulk Billed
 - 24% Pension rate
 - 23% Concession rate
 - 32% Standard (full) rate
- The gap range is from \$11.00 to \$27.35.

Service Delivery: Additional Programs

In addition to Medicare Better Access Social Work services are provided through:

- Victims of Crime NSW
- DVA
- EAP
- Workcover
- Private/Self referred
- Third Party partnerships

Intalink has no access to ATAPS funding. Hunter Regional Division of General Practice refers to one sole provider in our area.

Service Delivery: Referral Patterns

Our referral statistics demonstrate that our service is meeting a need that has not been met by others:

- Over 1650 client referrals since May 2008
- 133 Medical Practitioners (GPs, Paediatricians & Psychiatrists) have referred clients
- In total, we have had 194 individual referral sources

Service Delivery: Collaborative Partnerships

Partnerships have been established with the following organisations:

- Biripi Aboriginal Medical Service
- Great Lakes And Manning Aboriginal Children's Services (GLAMACS)
- Life Without Barriers
- Department of Community Services
- Uniting Care Burnside
- Schizophrenia Fellowship
- Local community based Children's Services for example Snugglepot Day Care and Taree Early Intervention
- Lifetime Care and Support Authority of NSW
- Samaritans Foundation
- Great Lakes Manning Community Options
- The Catholic Schools Office
- Barnados

Additional Areas of Service Delivery

- Provide supervision for social workers, psychologists, registered nurses and counsellors in government and non-government agencies
- Liaise closely with General Practices. We have a number of GP's who know that if they call our service requiring an urgent appointment our therapists are willing to be flexible and fit emergency appointments.
- University of Newcastle Medical Undergraduate Training: Provide placement experience for 4th Year Undergraduate Medical Students of Newcastle University placed at Manning Rural Referral Hospital for their Paediatric Elective.

Meeting the Needs of the Area

Case examples showing how we are servicing areas of need in the community include:

- Client with diagnoses Drug Induced Psychosis, Forensic history , Brain Injury & Substance Abuse referred via local GP to our service from a Mental Health Case Worker from another area.
- When referring a 15 year old girl, diagnosed with depression and anxiety and recently kicked out of home, a GP commented 'You only get one chance with some clients – I know if I send her to a SW she will have more of a chance to engage'
- Recent DoCS referral (via GP) for 14 year old aboriginal boy with diagnosis of ADHD and symptoms of CD. Has continued to attend counselling and engaged with service.
- Year 12 student diagnosed with Depression on referral, then PTSD following further assessment and disclosure of sexual assault in counselling.

Meeting the Needs of the Area:

Feedback from Referrers on Social Work Practitioners

In conversations with Referrers our Social Workers have received the following feedback:

- Clients who have 'failed' with other services have been able to engage with Intalink
- The difference is the quality of engagement
- For the first time the most marginalised people have been able to access mainstream mental health services
- Intalink is offering a specialist service for clients who require complex interventions

One response to the service from our Social Work staff was that they have 'never worked in service with so much diversity – we are saving lives and keeping lives on track'

Meeting the Needs of the Area:

What do Social Workers Contribute?

- A Breadth of clinical experience
- Appropriate Mental Health knowledge & skills assessed by our professional organisation
- Skills in engaging and working with all areas of diversity, including non marginalised individuals
- From our earliest placement experiences developed skills in working with marginalised people in the community contributing to knowledge & skills in working with Dissociative Disorders, PTSD, Eating Disorders, Suicidality

Regional Workforce Issues:

Recruitment

- Extremely difficult to attract private providers, especially psychologists to rural and regional areas.
 - advertised for either Psychologists or Clinical Psychologists three times over the past twelve months
 - Advertised Oct/Nov 2009 for a Psychologist - no replies over a period of one month
 - From that ad we recruited a highly experienced Mental Health Social Worker from Melbourne
 - Advertised again in May 2010 for 2 psychologists: many express interest until realise we are in Taree
 - Processing application from O/S for position
 - High cost to business to sponsor a skilled migrant: are now in process of sponsoring second skilled migrant to practice

Local Impact of Proposed Better Access Changes

For Intalink

- Already lost one Social Worker
- Practice not viable without Social Work staff:
SW = 2.2 FTE Psychologists = 1.2 FTE
- Paediatric Services (OT & SP) have never been able to be self supporting – they are enabled through our Mental Health Services
- It is very difficult to recruit Psychologists to rural areas, it would be even more difficult if SW & OT not included under Better Access
- Our service would cease to be viable.

Possible Local Impacts of Proposed Better Access Changes

For Clients

- *Loss of fully equipped integrated allied health service*
- Prior to our service being established, other services in Taree had long waiting periods – delays for service again.
- Decreased availability of services may increase gap fees and Mental Health service gaps may become prohibitive for many individuals and families in our community.
- Increased pressures on Community Health Services who already have extensive waiting lists
- Many clients with children and adolescents with complex mental health issues may be forced, again, to travel to Newcastle & Sydney for services.