



NSW Consumer Advisory Group – Mental Health Inc.  
ABN 82 549 537 349

24<sup>th</sup> February 2011

Regina Osten  
Manager Prevention and Community Partnerships  
Mental Health and Drug and Alcohol Office  
NSW Health

roste@doh.health.nsw.gov.au

Dear Regina,

**Re: Case Management: A guide for public mental health services**

As a member of the Chronic and Continuing Care Recovery and Rehabilitation Working Group, the NSW Consumer Advisory Group – Mental Health Inc. (NSW CAG) has reviewed the January 2011 draft of the *Case Management: A guide for public mental health services* (the draft guide)

We note that that the latest version of this guide incorporates many of NSW CAG's and the Mental Health Coordinating Council's (MHCC) recommendations that were raised in correspondence sent to you on 15 April 2010. NSW CAG welcomes these changes and is particularly pleased that the latest version of the guide attempts to incorporate the philosophy and principles of recovery throughout the document.

Before addressing specific sections of the latest draft, we want to again raise NSW CAG's concern that the guide has been produced without conducting a broad consultation on what constitutes 'Case Management' and whether the term is appropriate at all to describing the relationship between consumers and clinicians. As was detailed in NSW CAG's advice on 15 April 2010, consumers throughout NSW consistently report to NSW CAG that they do not want to be viewed as 'cases to be managed' but rather as individuals requiring support on their journey to recovery.

The introduction to the guide acknowledges "that the term Case Management is controversial...and requires resolution" but provides no specific detail on why it is so controversial, namely that is term unwanted by those receiving mental health services. NSW CAG recommends that the introduction be re-drafted to include the following statement:

*"It is recognised and acknowledged that the term 'Case Management' is controversial, particularly among consumers of mental health services. It is intended a broad consultation will be conducted with consumers to develop a more appropriate term, which will be incorporated in future versions of this document"*.

---

Suite 501, Level 5 80 William St Sydney NSW 2011 Tel: 02 9332 0200 Fax: 02 9332 0299

NSW CAG is the peak body for mental health consumers in New South Wales  
NSW CAG – funded by the NSW Health Department

## Comments on specific sections of the draft guide

### *Working within a Recovery Paradigm*

As was detailed above, NSW CAG welcomes the greater acknowledgment of the principles of recovery throughout the draft guide. NSW CAG also supports the placement of an entire section explaining the recovery movement in the opening part of the draft guide. While supportive of this section and its contents, NSW CAG believes it could be strengthened with quotes from consumers about what recovery is and what it means for them as an individual. The quotes below were taken from consumers at NSW CAG's 2010 Recovery Forum and may be included with appropriate reference in the guide;

*'Recovery approach... basically not diagnosing everyone the same...not just reading the DSM and saying this fits, and this fits so try this medication, um..and emphasising again the hope, that there is a light at the end of the tunnel not saying we're going to see you again [laugh] not treating consumers like cattle. Treat them like human beings and with respect'.*

*'For me, the most core thing about a recovery orientated approach is that the person is in the driver's seat, that is the person that's in control. You know, if you haven't got that fundamental right then you don't have a recovery approach in my view so its actually about the person, but its also about respecting the persons ideas, suggestions, concerns, opinions'.*

### *Definition*

As above, NSW CAG believes this section of the guide should detail the need for consumers to be consulted in developing a more appropriate term describe the relationship between clinician and consumer, other than 'Case Management'.

### *Competencies*

#### a) Engaging the Consumer

In the *Engaging Consumers* section of the diagram, a reference is required around the need for case managers to be aware of the principles of recovery and to provide information to consumers about their treatment and support options.

The diagram could be amended to include the following points under the *Engaging Consumers* title;

Key Area	Knowledge	Skills	Behaviour
<i>Engaging Consumers</i>	Demonstrates understanding of the principles recovery and the importance of collaborating with consumers to define their personal goals, plans and strategies.	Engages with consumers to develop a therapeutic alliance (including situations of involuntary treatment in the community).	Demonstrates strong skills in applying the recovery model including skills in communication, conflict resolution and normalising a consumer's experience.
	Awareness of a variety of different treatment and support options and of the need to communicate these to the consumer.	As above.	Demonstrates strong communication skills and the ability to ensure the consumer remains a participant in their recovery journey.

b) Developing Partnerships

It is recommended that each point listed under the developing partnerships section of the diagram be amended to make specific mention of the need to develop partnerships in consultation with consumers.

*Philosophy of Case Management*

As outlined in advice provided on 15 April 2010, linking services and psycho-education need to be added as key values of case management in a post-modern framework.

*The objectives of Case Management*

It is recommended that the 'objectives of Case Management' be amended to include the additional objective "to provide consumers with information on mental health and different treatment and support options". In keeping with working within a recovery model, an essential objective must be ensuring consumers are equipped to become informed participants in their journey towards recovery.

*Process*

While this section incorporates many of NSW CAG's previous recommendations, it is recommended that the sentence 'Effective case management is a complex process of balancing priorities to assist and support consumers with complex needs in their recovery' be amended to 'Effective case management is a complex process of balancing priorities to provide a safe environment and support for a consumer in their journey of recovery and optimize their adjustment to the community'.

*Components in the process- Care Planning.*

It is recommended that the word 'nominate' in paragraph six be changed to 'incorporate'.

Please do not hesitate to contact me to discuss this further.

Yours sincerely,



Karen Oakley  
Chief Executive Officer