



PULSAR Newsletter

APRIL 2017

Welcome to the April PULSAR Newsletter

This newsletter is for everyone involved in PULSAR including mental health service staff, GPs and other interested people. It is our way of keeping you in touch with how the project is going. If you don't wish to receive this newsletter, just email us at pulsar.admin@monash.edu and we will remove you from the mailing list. Keep an eye out for our new website but in the meantime, please visit our current website for previous editions: www.pulsarrecovery.org.au

Spotlight – Senior Nurse, Community Care Unit, Helen Waite

Can you tell us a bit about yourself and how you came to be involved in the PULSAR project?

Well, I am a nurse from the UK and I have been in Australia for almost 9 years. I have been at the CCU for nearly 2 of those years. I have always been interested in recovery-focused work and group work. When I heard about the plan to do some research around implementing some of the PULSAR training with the consumers (using PULSAReveryday) I was quite happy to be involved.

How did you find the PULSAR training from the perspective of a clinician?

The two day training was really good and every part of it was relevant. It was good to be with colleagues from other parts of the service and talk about the different and similar ways that we work. I think the difficult thing was working out how to implement the PULSAR elements into our group program. Obviously, we are recovery-focused here and we do run a group program but I felt that last week's session, which was our first PULSAReveryday session was great because it wasn't a consumer led activity but the consumers were heavily involved in it. Our group program can be a bit prescriptive at times and we are teaching consumers what we think they ought to know. Whereas last week myself and the other staff really enjoyed it. Whilst we encouraged them, a lot of the ideas came from the consumers.

Has the PULSAR training changed your day-to-day practices with staff and consumers? And if so in what way?

Personally, no because I like to see every opportunity for engagement as an intervention but I think it is good training for those who are a bit process driven to understand that consumers don't always want to talk when we want to talk and if they start talking about something meaningful for them it is quite important to find the time no matter what is going on.

Is there anything from the training that has stayed with you?

With the training the thing that stayed with me was that we need to keep working at making recovery consumer-focused and not just using the HONOS as our guidelines around success and failure. I think that is something that we haven't achieved yet. I think possibly the whole funding issue, not just for mental health but for physical health as well, needs to change. I know that we are funded based on our HONOS scores as performance indicators which are all very medical. So I would be interested to see how we could go forward and work with that as a group.



Helen Waite, Senior Nurse

What is recovery-oriented practice and the PULSAR project?

Recovery-oriented practice involves supporting people to build and maintain a meaningful life and personal identity regardless of their ongoing symptoms of a mental illness. The Principles Unite Local Services Assisting Recovery (PULSAR) project encompasses the delivery and evaluation of a training intervention in recovery-oriented practice for General Practitioners (Primary Care) and Specialist Mental Health Service workers (Secondary Care) in Melbourne, Victoria.

Meet the PULSAR project team



Vrinda Edan,
Consumer
Academic and
Investigator

Vrinda has worked in the consumer movement for 18 years, and for almost 10 years grew the Lived Experience workforce at Monash Health. As well as working on PULSAR she works with St Vincent's Hospital Melbourne as Consumer Workforce Project Officer, State-wide Learning and Development, exploring the needs of the Lived Experience workforce. In addition to her working roles, she is the chair of VMIAC, the Victorian Peak consumer organisation.

PULSAR Primary Care

GP SPOTLIGHT

Dr Michael Kozminsky, Genesis Medical Centre

Genesis Medical Centre staff describe the practice as: "We welcome everybody and every day is a good day for a new start".

Why did you join the PULSAR project?

Because psychology and psychiatry are an essential part of every GP's skill set. Every interaction we have with a patient, whether it be regarding a broken arm, a patient with psychosis, or a patient with depression; all interactions with patients have a psychiatric or psychological component. Therefore I saw an opportunity to improve my skills and I jumped at it with open arms. One thing that has occurred to me is how much the GP of the day has taken over the role of the priest of yesteryear.

What was your experience of the PULSAR project?

We had two PULSAR training sessions where all staff in the practice attended. The presence of all staff emphasised the point that the patient's treatment commences, not when they walk into my office, but when they walk into the practice. A consequence of this attitude was that we had no difficulty in having a significant number of our patients enroll in the project and practice staff were integral in driving this. Also the monthly PALS sessions



Dr Michael Kozminsky.

with Professor Graham Meadows, greatly enhanced my knowledge and expertise.

What methods did you use for recruiting patients?

When patients came in, everyone who was eligible was asked if they were interested in enrolling in the study. It took us less than one day to achieve our quota! This is partly due to the fact that we have a high proportion of patients with mental health diagnoses compared with other practices.

PULSAR Primary Care Project Status

 **30** GPs

 **16** CLINICS

 **24** GPs TRAINED IN RECOVERY ORIENTED PRACTICE

 **230** SURVEYS RECEIVED FROM PATIENTS

 **3** SURVEY COLLECTION PERIODS (T0, T1 T2)

 **5** INTERVIEWS CONDUCTED WITH GPs

 **2** INTERVIEWS CONDUCTED WITH PRACTICE STAFF

GP PALS NEWS – PULSAR Active Learning Sessions

Last GP PALS!

We thank all GPs and practice staff for their participation in GP PALS in 2016 and 2017. GPs and practice staff who have attended PULSAR training have the option of attending the last videoconferencing PALS session in April. We are continuing to work on our web-based PALS and will keep GPs and practice staff informed of the launch date.

PULSAR PRIMARY CARE SITES



What is PALS?

GPs and other professionals who have received PULSAR training are invited to attend monthly online sessions with our consultant specialist psychiatrists to review, reflect and share their experiences in the implementation of recovery-oriented practice. These sessions provide an interactive learning environment for supporting practice based implementation of learnings from the PULSAR resources and training package.

2017 PALS date:

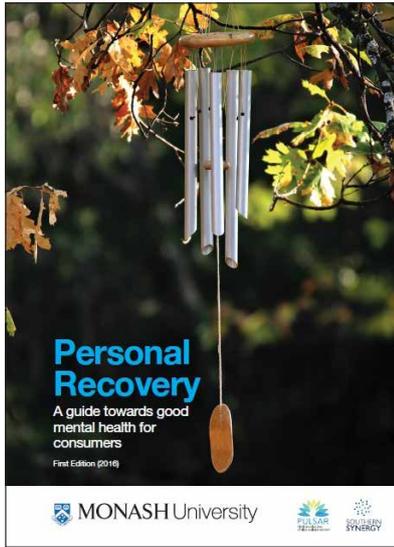
■ Tuesday April 11, 2017 6pm - 7pm

For more information or to register for PALS, contact us on 03 9902 9695 or pulsar.admin@monash.edu

PULSAR Secondary Care

PULSAR *Everyday* News

The PULSAR *Everyday* workbook was piloted during March 2017 with two groups of consumers, one from a Community Care Unit and one from a PARC facility. The groups were well attended with at least 5 consumers in each group. The sessions were voluntary and facilitated by Michelle Kehoe from PULSAR and at least one staff member from each facility. The groups entailed introducing the consumers to recovery-oriented practice and the CHIME framework. During each session there was the opportunity for the group to discuss the concepts and create an artwork to represent each component of CHIME. The final group allowed consumers to bring



together all of the components of CHIME using their artwork and think about how they would like to complete the rest of the book, including the working practices. Consumers received a certificate to acknowledge their participation presented by Michelle on behalf of PULSAR and Monash University. At the end of every session consumers completed an evaluation and will have the opportunity to attend a focus group during April to give feedback on the book and content of the sessions to inform future delivery. Staff will also have the opportunity to give feedback on the group sessions.

What is PULSAR *Everyday*?

PULSAR *Everyday* is a consumer-led sub-project of the PULSAR Project Implementation Group. The aim of PULSAR *Everyday* is to develop a range of tools based on the PULSAR principles to assist consumers and their families/carers to better understand recovery-oriented practice.



PULSAR Qualitative project update

The qualitative team is currently recruiting and interviewing secondary care consumers. The aim is to complete a further 10-12 interviews over the next few weeks. In addition, the team has interviewed 3 family/carers and is seeking to interview 3 or 4 more.

PULSAR SECONDARY CARE SITES



NOTE: Several sites have multiple services administered by the organisations indicated.

PULSAR Secondary Care

PULSAR Dissemination – Conference update

Currently the PULSAR team has a total of 12 papers submitted to the following conferences:

Refocus on Recovery

1 symposium and 3 papers.

Institute of Mental health,
University of Nottingham.
18 – 20 September, 2017.

www.researchintorecovery.com/ror2017



ENMESH

4 papers.

Conceptualizing, measuring and
influencing context in mental health care:
from the individual to society.
Groningen, the Netherlands
October 5, 6 & 7, 2017

<https://enmesh2017 Groningen.com/>



TheMHS

1 Symposium and 3 papers.

Embracing Change through Innovation
and Lived experience.
Sydney,
29 August – 1 September, 2017



PULSAR study on the cross-cultural relevance of a mental health recovery questionnaire (the QPR)

In the October 2016 newsletter, we introduced a PULSAR sub-study investigating the relevance of the Questionnaire about the Process of Recovery (QPR) within culturally and linguistically diverse (CALD) communities in Australia, which was being undertaken as part of a University of Melbourne Master of Public Health program. The study is now complete and we are pleased to be able to share some of the findings with you.

The QPR is a self-report questionnaire designed to assess consumers' experience of personal recovery, and is being used as the primary outcome measure in PULSAR.

In this study, 9 consumer participants from CALD backgrounds (5 Iranian, 4 Burmese) were invited to complete the QPR that had been translated into their local language. Participants were then interviewed in their native language about their experience of completing the QPR, their understanding of recovery processes, and the implications of the recovery concepts used within the instrument from the perspective of the CALD



community. Two GPs from PULSAR sites were also interviewed about their views on the relevance of the QPR among CALD consumers.

Responses to the interviews suggested that the concept of personal recovery was not clearly understood by consumer participants, resulting in difficulties in understanding some of the QPR items. Although consumers did demonstrate some knowledge of mental health, GP participants reported that CALD consumers often had poorer medical history information, greater prevalence of mental

illness, and lower health literacy than non-CALD patients.

Although further work is required to successfully adapt the QPR to different cultures, the findings of this study indicated that both GPs and CALD consumers considered the QPR to be a potentially very useful and responsive tool for identifying needs, facilitating referrals and setting recovery goals among CALD consumers accessing mental health services. We hope that these findings will inform larger-scale studies in evaluating personal recovery interventions in CALD communities.

Contact PULSAR

Please contact us with feedback, questions or to unsubscribe from this newsletter:

Phone: (03) 9902 9695

Email: pulsar.admin@monash.edu

www.pulsarrecovery.org.au