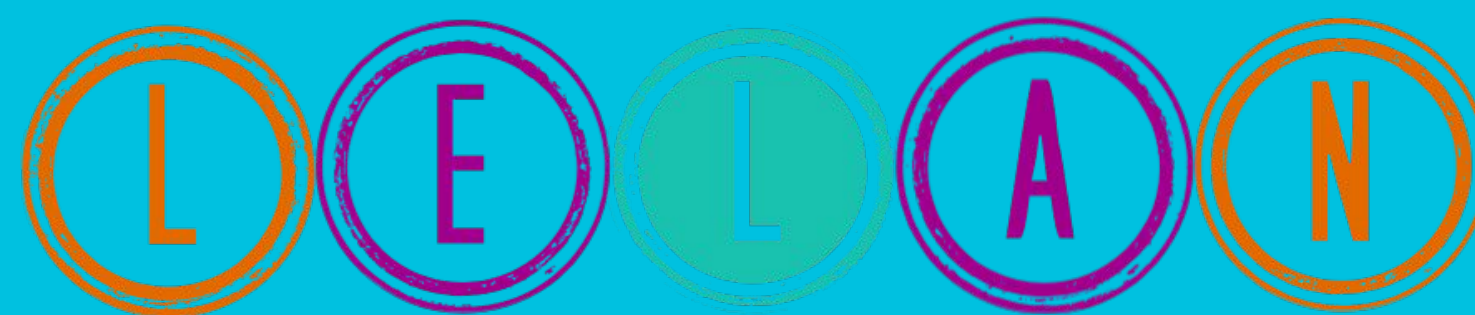# The co-creation of the Philosophy of Care

LELAN

THE AUSTRALIAN CENTRE FOR SOCIAL INNOVATION

# Tips for Friday:

Read the 6 themes below - comment on the LELAN forum if you want to add anything or you think something is missing

We will connect on Zoom again - click in the invite link:
https://zoom.us/j/936479216?pwd=a2srS2N5SGRtQXN3TzhrTis1U0Qrdz09 . You shouldn't need these numbers but we have included just in case: Meeting ID: 936 479 216 - Password: 068746

During the session on Friday we will use Google Docs to create a shared document so everyone can see the conversations that we are having

We start at **10am on Friday**  we will be in the Zoom link at 9:30am if anyone would like some support getting connected to Zoom or using Google Docs. We will aim to finish at 2:30pm.

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# What we heard

On Friday 20th March we had exceptionally meaningful conversations with you all - Thank you!

We have attempted to extract what was standing out as 'most important' from these conversations.

We have landed on 6 themes and would love to know if we got it right and whether anything important is missing?

This Friday we will dive deeper in to these themes in order to build out the philosophy of care for the centre.
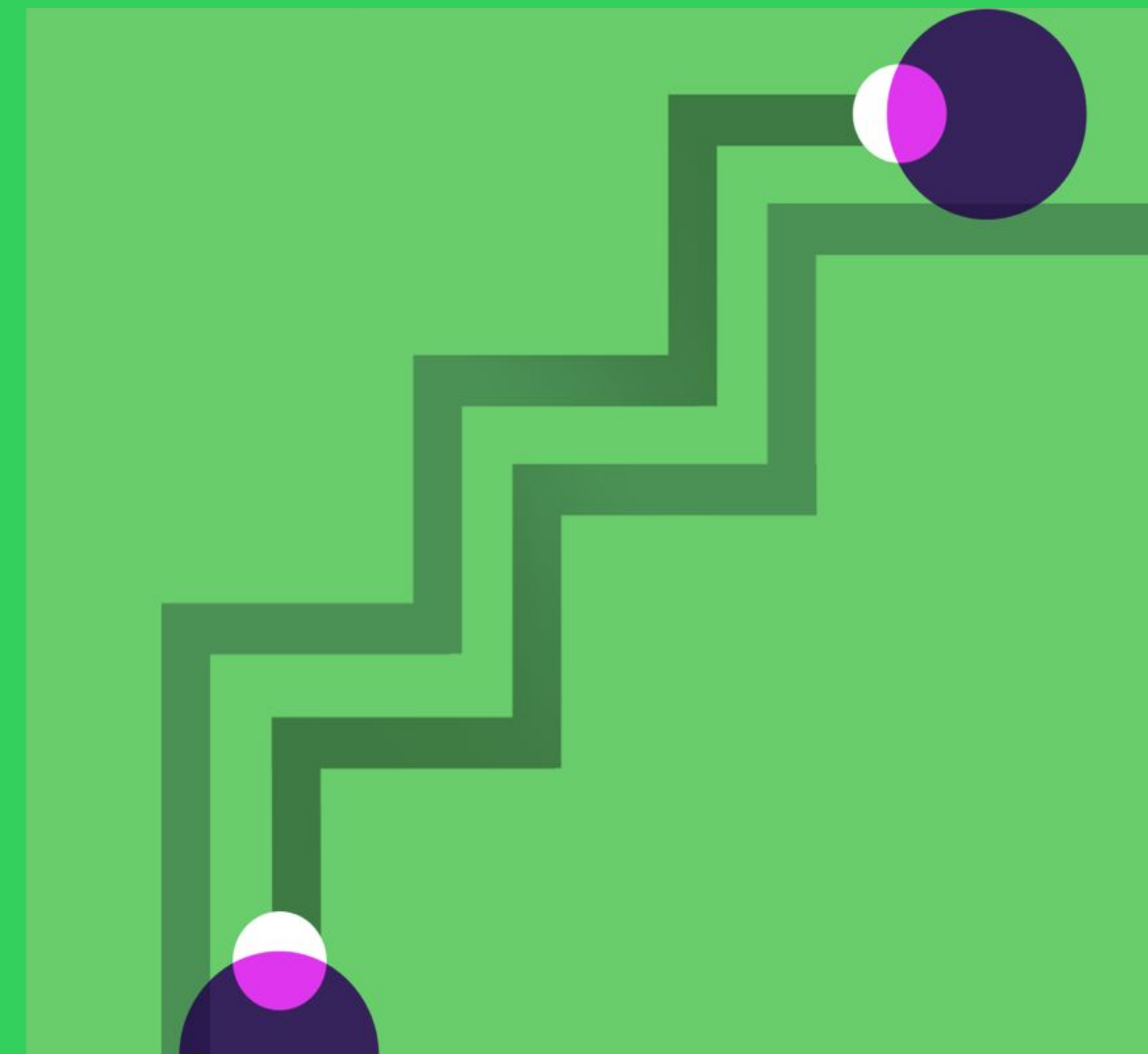
# #1 - The Culture: Roles and People

"*I just need someone to help me level out my emotions.*"

"*I want to be welcomed with gentleness and kindness*'."

# #1 - The Culture - roles and people

We want a variety of roles: listeners, story capturers, witnesses, validators, assertive advocators, community connectors; lived experience involvement in ongoing centre's growth and development

We want values-based recruitment to prioritise team culture aligned with the intent and practices of the service

We Want time to be provided to the staff to work on the culture of the service and reflect on their practices together

We want staff to be recognised for their contribution rather than for the position they hold

We want roles that are clear so not to compromise practice and to ensure we leverage specific skills

We want therapy assistance animals

We want transparency of staff role, service offerings and support provided

# #2 - Lived Experience at the heart

"*I just want someone by my side who gets it.*"

*"It's nearly impossible to advocate for yourself when you are in the thick if it"*

# #2 - Lived Experience at the heart

We want people with lived experience as the central organising feature for the service

We want clinicians to share the space and the role of expertise with peer workers - The model of care needs to be equally blended between both worlds

We see an opportunity here to acknowledge and cement lived experience as an equal and valuable discipline within the centre.

We see an opportunity here to break the stigma that lived experience are often viewed: as being unreliable, broken or too fragile to fully take on a 'serious' role

We believe the true knowing of distress and crisis helps you to have an innate understanding of people's needs and thresholds therefore can support clinicians to know when to slow down, speed up, change tak

We beleive that people come to the centre because of a human experience (one very familiar to centre staff)

# #3 - Safety not surveillance

"**Safety is important but I don't want to be ruled out because of my history.**"

# #3 - Safety not surveillance

We believe the excessive presence of security guards doesn't help to enhance the wellbeing of people receiving mental health care. (In other countries, Security guards do not use uniforms).

We want a centre that doesn't pre-empt that something 'bad' is going to happen

We do not want 'guards' in the centre, moress there are staff who are there to help people feel safe

Clarity promotes safety - '***Please explain to me what's going to happen'***

We want any point of escalation is first instnace responded to by a peer worker staff)

There is value in NOT reading a persons file

# #4 - Language: healing & 'Care' full

"*Same disorder, different people - I want choice and the right to define*"

# #4 - Language: Healing & 'Care'full

We want to allow people to tell their stories in their way, they are desperate to

We believe carers are also great sources of knowledge; they need to be heard and validated too

Caring questions and actions, people don't feel bad for reaching out and feel ok to return if they need.

People leave with the message that 'we are here if you need'

People want staff to understand more of who they are than their mental health only. Their story is more than a diagnosis, medication or what led them to the ED. People want to eb asked, 'what is going on for you?' or 'what has happened?' rather than 'what is wrong with you?'

Development of a 'care' full language guide that strengths based, respectful, curious about people's whole selves, inclusive and distinctly diferent - co- written by the users of the service and their supporters; not using labels or symptoms; Being really explicit about the terminology used and why (e.g. for one person the term 'consumer' was good as she identifed with the social justice element; for another, not good)

No diagnosis talk
No coercion
No mention of code black

Language indicates how people perform their role

We want immediate validation and acknowledgement - *'People need to hear, You have done the right thing, You are in the right place no matter what, WE can work this out'*

# #5 - Values driven practice

# #5 - Values Driven Practice

**Time** - Take the time that needs to be taken to build rapport  truly listen and move at the most helpful pace

**It's about recovery -** A focus on strengths (from past) and supports, not illness or symptoms. limitless possibility and belief in people

**Connection -** Genuine engagement and connectedness with people

**Empowerment -** Supporting people to connect to their own wisdom and solutions - Intentional enabling of strengths and empowerment for users of the service.  Help us put our own situation into our owns hands - Support me to know that I can reclaim myself. Hand back the batton to me

**No isolation -** People in distress are not left alone with their thoughts, distress or story

**Culture and diversity** - Peoples' culture and relationships are important to understand

**Mindset shift** - from 'I know what's best' to 'help me understand what you need right now'

**Goals -** My goals are established or recognised and are never left behind

**Challenge** with kindness if we stray for philosophy in order to re align

**Championing rights** - Informed decision-making, Importance of honouring identity, Choice to choose who you want as 'support' in the staff there, Being treated as an expert in your own experience, being asked questions, giving choices, honouring responses

**Trauma Practice** - not just informed

Acknowledgment for the past hurts of the 'system'

# #6 - Leaving is just as important as arriving

*"Leaving a service, that is where I have been let down time and time again"*

# #6 - Leaving is just as important as arriving

*'I want to feel connected to the next step post departure'*

*'Practical support (social work support) can be the very thing that if lacking can trip me up'*

Connected to the people that use the service, the staff and also connected pathways with services that have a role with entry into and out of the service (eg SAAS, SAPOL and NGO's)

Community Partnerships need to exist and be strong

The Centre needs to be integrated and connected with other complex systems like the community mental health services delivered by government and NGOs, DASA, Homelessness services, NDI,   Domestic Violence, and inpatient services.

People are supported to develop a plan that supports their own care

Any plan is doable and tangible, 'what's your plan for tomorrow or this next week?'

A plan that has energy and action in it not just words on paper