About Richmond Fellowship of Western Australia

Richmond Fellowship of Western Australia (RFWA) is a non-government organisation that participates in providing a Recovery-focused environment for people with a diagnosable mental illness.

RFWA is well known for programs that integrate the key elements of recovery with accommodation and support services such as recreational activities, guidance on practical living skills and intensive counselling to provide participants with the confidence and skills they need to recover from mental illness and meet the daily challenges of life outside an institution.

Building on a solid foundation of accommodation support programs that provide community based housing and skills development support in a non-institutional environment, RFWA is expanding its services to include assistance in employment, training and consulting for the community and corporate sector.

RFWA is driven by an innovative strategic plan and caring staff that are steadfastly committed to their participants’ recovery, and continually develops its programs to ensure the very best in recovery services are available to consumers.

Our History

RFWA is part of a network of Richmond Fellowship organisations throughout the world. The original Richmond Fellowship was founded in 1959 by Elly Jensen in Richmond, England.

Elly believed that people recovering from a mental illness would benefit from living in a supportive community setting. As a result, she established a community based house for ex-psychiatric hospital patients that offered both support through skilled counselling and assistance to face the demands of life outside of the institutional environment.

In 1975, Elly with support from numerous members of the Western Australian community established The Richmond Fellowship of Western Australia (RFWA). Financial assistance was provided by the Commonwealth Government, the Lotteries Commission of WA and a bequest by the late Mrs Ruth Downer. Since its formation, RFWA has grown from strength to strength and today provides a range of support services to people in various residential settings throughout the Perth metropolitan area and south west.
Rebekah’s Story

My recovery journey has been a road of obstacles, learning, understanding and importantly self-acceptance. I was first diagnosed with a mental illness three years ago at the age of 16 when I was admitted to Bentley Adolescent for a period of eight weeks.

My first experience of hospitalisation was negative. Home was 500km away and the anxiety and loneliness of being separated from family and friends along with coping with the effects of medication made it really tough. In retrospect, hospitalisation was the best option and the first step in my recovery.

After being discharged, I struggled with my illness and began a cycle of denial. I believe this was due to what I felt was a stigma attached to mental illness and I was embarrassed. I didn’t share with friends my hospital experience and I soon stopped taking medication unbeknown to my family and case worker.

My refusal to accept my mental illness meant I did not try and understand the condition or learn to identify symptoms of relapse. I managed to live a normal and healthy life without medication for two years however, my health slowly deteriorated and was hospitalised for five weeks.

It was my third relapse a year later that led to the wake up call I needed. I finally accepted that my mental illness was very real and decided that I needed to take responsibility for my condition in order to live a full and healthy life.

I now talk openly about my mental illness, take my medication and I am feeling confident that I’m getting my life back on track. I have enrolled at Tafe with the view of going to University. I avoid alcohol and other toxins and participate in physical activity every day.

I’m learning to manage my illness and am well on my way to recovery.
RICHMOND FELLOWSHIP WA BOARD

Lyn Willox, Chair
Lyn was invited to join the Board of Management in March 2001 as a carer representative. She brought with her over 25 years of experience in the mental health and disability sector through her career as a Registered Nurse with the Cerebral Palsy Association of WA as well as her personal experience as a carer of someone with a mental health issue for some 30 years. She was elected as Chairman three years ago and is also a member of the Financial Committee.

Colin Cleaver, Vice Chair
Colin Cleaver joined the Board of Management in September 1998. He spent 27 years with the Bank of New South Wales/Westpac with 14 years at a management level. Since 1988, Colin has been involved in real estate and brings to the Board experience in property development, sub-division and planning issues. Colin has a long history of involvement with voluntary agencies and he was previously Treasurer of the Rotary Club of Victoria Park. Colin is well known in local business circles and has close family involvement with Swan Cottage Homes and issues of retirement. Colin was elected Vice Chair in October 2006.

Peter Carden
Peter Carden was elected to the Board of Management in April 2004. He has worked as an accountant for many years, and owns his own business in Merredin. He has been involved in many causes over the years, including fundraising as well as board membership of the Merredin Hospital. Peter also has extensive experience in property development.

Digby Munro, Consumer Representative
Digby Munro was appointed to the Board of Management in November 2003 as a consumer representative. Previously living in one of our Residential Rehabilitation sites, he is now living independently while receiving Supported Independent Living services from the East Fremantle Team. Digby has contributed significantly to the promotion of the RFWA role and goals as well as the issues facing people with mental illness. He has been very active in promoting consumer participation and advocating for consumers through representation on committees. Digby is currently employed with the Carer Respite program and also volunteers with the State Emergency Services.

David Shearer
David was a member of Richmond Fellowship’s inaugural steering committee and became a member of the Board of Management in 1996 following his retirement as a solicitor from the Crown Solicitor’s office. As well as his legal expertise, David brings an extensive knowledge of Richmond Fellowship’s history and development gained from his long association with the organisation. Davis has been a Board Member for South West Counselling for the past 27 years as well being an active Board Member for two not-for-profit organisations Missionoz Imara and the Freedom Christian Ministries.

Shirley Lancaster
Shirley Lancaster joined the Board of Management in March 2006. She is an accountant and registered Tax Agent, having worked in the public sector for the last 22 years, and more recently operating her own business. Shirley is actively involved in ‘Business and Professional Women’ and is a charter member of BPW Belmont. She is the inaugural Treasurer and more recently took on the role of State Treasurer. Prior to studying as a mature age student, Shirley worked in a variety of roles within the industries of retail, wholesale and manufacturing. In her capacity as an accountant she is also a member of Richmond Fellowship WA’s Finance Committee.

Eric Atkins
Eric Atkins rejoined the Board of Management in April 2005 after previously serving as Chairman of the Board. Eric has a strong financial background having been a member of the Chartered Accountants of Australia and running his own accounting practice for close to 35 years. Eric has been an extremely active member of Rotary International for over 33 years and has held a number of office bearing positions in his local Club including the role of President.

Michael Cahill
Michael has a wealth of experience in Mental Health and aged care having worked with Alzheimer’s Australia WA for over 10 years and in his current role as a Senior Project Officer with South Metropolitan Health Services. As well as the Richmond Fellowship Board of Management which he joined in 2009, Michael also sits on the Board of Carers WA and is the Chairperson of SuMMAT, the South Metropolitan Mental Health Advisory Group. He is a Churchill Fellow, awarded for his work in dementia care and has presented numerous papers on Mental Health, Global Ageing and Dementia both nationally and internationally over the past 15 years.
As I reflect on the past year I am encouraged to read of the successful journeys of many of our residents. Their stories are truly inspiring.

To me the key elements of this success for residents are the acceptance of the mental health issue and the desire to make changes.

At Richmond Fellowship WA our dedicated and professional staff are ready to guide and support residents to a more meaningful life. The success of these changes is dependant on the way our staff works with residents to reach their individual goals.

The residents and staff are not the only ones constantly striving to improve. The Board undertook a Governance Review conducted by Peter and Tamara Smith. The outcome was somewhat reassuring and recommendations are currently being implemented.

Board Changes
Paul Gurry resigned from the Board to further pursue his work with “Refocus” and “Pathways to Wellness”. We thank Paul for his contribution and wish him well. In January we were pleased to welcome Mike Cahill onto the Board.

I wish to acknowledge the ongoing commitment of all Board members. Thank you for your support.

Highlights
I was delighted, together with Warren Smailes, Dusa Tokic and Digby Munro to represent RFWA at Richmond Fellowship ASPAC (Asia/Pacific) Conference in Bangalore, India, in October 2008. We gave various presentations but the main interest centred on our focus of Recovery.

Another highlight this year was the Recovery from Psychosis Conference held in Perth in November 2008. It gave us all an opportunity to hear from many respected international speakers as well as our local presenters. This conference was followed by the Intervoice 2008.

To be a sponsor at the Inaugural Social Worker of the Year also gave us the opportunity to acknowledge their contribution to Mental Health Services.

Patrons
We were saddened by the passing of our Patron Dr Richard Ellison. He had been part of the establishment of Richmond Fellowship in Perth in 1975.

To John Casson AM and Diana Warnock a sincere thank you and a special welcome to Dr Geoff Gallop AC.

In conclusion, I wish to pay tribute to our CEO, Joe Calleja and all our staff. Together we can and do, make a difference.

Lyn Willox
Chair
“Hope”, “change”, “partnership” and “advocacy” are the words which capture much of the activity at RFWA during the past financial year.

We continued to promote the hope of recovery through our individual work with consumers and by helping to strengthen the consumer voice in Western Australia. The individual stories of recovery we see and hear provide proof that mental illness does not have to be a life sentence, but that things can change and improve even though it might not be the same as before. We plan to build on our approach by more actively engaging with carers and family members through education and support.

Our past year has been a time of considerable change as we established our new program in Bunbury and consolidated our programs in Busselton, Kelmscott, Personal Helpers and Mentors (PHaMs) and Carer Respite. We also brought to fruition our dream of establishing Hearing Voices groups throughout the metropolitan area with the support of Lotterywest. We have contributed to change also through our Education and Training program which included Recovery training and through the international Recovery from Psychosis conference.

We established partnerships with consumers through our support for the Western Australian Mental Illness Awareness Council (WAMIAC) which later became Consumers of Mental Health Western Australia (CoMHWA).

Our support for the Hearing Voices Network Australia extended to obtaining business development grants on behalf of HVNA from the Mental Health Council of Australia. We engaged in a strong groundbreaking partnership with INTERVOICE to hold their annual international meeting in Perth in November 2008, the first time in its twenty-year history that it was held outside Europe. To complement their meeting we organised the Recovery from Psychosis Conference which was attended by over three hundred consumers, carers and service providers from all over Australia and overseas.

At the national level, all Richmond Fellowships around Australia were successful in their consortium bid to become a member of the Commonwealth Government’s Employment Innovation panel. We were also a major sponsor of the Social Worker of the Year Award which was run by the Australian Association of Social Workers WA Branch.

The past year has seen enormous activity by RFWA in advocating for improvement in services to consumer, carers and staff of the non-government sector. RFWA has supported the growth of the Psycho Social Rehabilitation and Recovery Association of WA (PRRAWA), the formation of Community Employers WA (CEWA) and the growth of Consumers of Mental Health WA (CoMHWA).

We continued involvement with Western Australian Council of Social Service (WACOSS) and Western Australian Association of Mental Health (WAAMH) as well as involvement in the short lived Social inclusion Reference Group of the previous government. We were appointed to the Statewide Reform Advisory Committee on Mental Health which has since become the Project Steering Committee for the Mental Health Strategic Plan 2010-2020.

RFWA also made submissions to the Senate Inquiry into mental health and continued its role as chair of the Centrelink Consultative Committee on Mental Health through its representation behalf of WAAMH.

We see 2009-2010 as a year for more innovation. We will support the introduction of consumer directed care services for mental health consumers in WA. We will continue to lobby for funding for an independent voice for mental health consumers. We will continue to contribute to the development of a mental health policy and strategic plan for Western Australia that will truly be based on the voice of the consumer and carer. Most of all we will continue to seek to improve our services so they support the individual journeys of recovery of the people we are funded to support.

I thank the Board, staff and supporters for their passion and commitment which has helped us in our work. We look forward to continuing to make a positive difference in the lives of consumers and their support networks through our work.

Joe Calleja
Chief Executive Officer

Richmond Fellowship WA
2008/2009 Annual Report
Recovery seems to take many shapes and forms. People tend to work on outward goals such as accommodation and employment, along with internal goals like learning to manage and cope with the challenges of having a mental illness. As a result, the issues are tackled on many fronts and it seems a process which although time consuming and difficult, is well worth the effort.

For many Hilton residents who have their recovery underway, a key issue is often focus. Focus on the bigger picture, goals, hopes and dreams and importantly focus on the plan of attack to help manage the stress, trauma, emotions and symptoms that may arise through having a mental illness.

One Hilton resident entered the service with a good understanding of her illness and various methods to cope with it. She completed the Dialectical Behavioural Therapy three years ago and continues to implement techniques that assist her. During her time at Richmond Fellowship her recovery plan has been fine-tuned as she continues to discover, learn and progress on her recovery journey.

The lady was recently joined by another resident who has had his recovery underway for a number of years. Having previously resided at the Richmond Fellowship this fellow is testament to how awareness, commitment, education and focus can make dramatic improvements to one’s quality of life. He can also demonstrate that the difficulties and challenges faced by those who embark on the journey to recovery require a lasting commitment.

It is rewarding to watch these two people support one another and give each other useful advice as to what techniques may help. To an extent they are ‘experts in their field’ and are encouraged to get in touch with their strengths and abilities. Both attend the weekly Richmond Fellowship Hearing Voices support group and also assist other voice hearers on their journey. They find sharing and supporting others a crucial element in health, healing and moving forward.
CORPORATE SERVICES

The Finance and Administration department based at Head Office in Cannington provides financial, accounting, management and administrative support to RFWA. In addition, the Department undertakes corporate reviews and audits to ensure that the organisation, as an employer and service provider, is complying with policies, procedures, standards, acts and legislations.

In September 2008 a departmental restructure was carried out due to the introduction of additional services. The review included the creation of two new positions, Assets Manager and Document Controller, and the restructure of the Finance and Administration Manager’s role to Executive Manager of Corporate Services.

During the year, the department assumed additional responsibilities resulting in a closer connection to the Clinical Services team. Additional tasks included:

- Database management;
- Preparation of quarterly reports for Government and other funding agencies;
- Formulating and reviewing policies and procedures;
- Restructure of purchasing procedure resulting in cost savings;
- Provision of consultative services to site offices on asset and budget management;
- Support and assistance ensuring risk management and guidelines were followed.

The Corporate Services team reported the following outcomes:

- The coordination and production of the Consumers Handbook;
- Representation on the Committee developing the Enterprise Bargaining Agreement (EBA);
- Attended training in Rent Setting, Supervisory and Leadership skills, Safety and Health Representative course;
- Attended the Recovery from Psychosis Conference and organised and attended the Richmond Fellowship display and sales table at the Conference;
- Negotiated new contracts for insurance, banking and motor vehicle fleet leasing services;
- Prepared, reviewed and analysed RFWA's financial statements along with input for the new budget;
- Introduced a Casual Friday Charity Collection and donated to the Victoria Bush Fire Appeals;
- Designed an eNewsletter as a modernised version of the Staff Newsletter;
- Assisted with the distribution and collection of both the Staff and Participants Surveys for 2009.

The Corporate Services team continue to work well as a group supporting one another in their positions. To understand other departmental roles, the ‘job swap’ initiative was introduced whereby all team members learnt other roles and can act in the role, if required.

The goal for the next year is to continue to develop skills and services so that the Department offers additional support to participants and staff and contribute to RFWA's growth.

Rhonda Chapman  
Administration Officer

Before Tom entered the service, his paranoia had restricted his use of public transport. He also used to display paranoid behaviours onsite such as repeatedly looking out of windows. Tom has greatly reduced these paranoid behaviours and has become more comfortable with travelling places alone. He now catches public transport and rides his bike to O.T. several times each week.

Bassendean team
Richmond Fellowship WA has introduced various initiatives to attract and retain qualified employees, however, continued to face increasing challenges in enticing and retaining a skilled workforce in an industry affected by low wages, not dissimilar to other not-for-profit organisations in the state.

**Recruitment**

RFWA’s recruitment strategy ensures that it advertises in a broad range of media, using branding that emphasises its focus on recovery. The ‘recovery’ focus is therefore integral to all recruitment and selection activities to ensure that we attract candidates with the right organisational fit. This strategy has contributed to the increased number of appropriate candidates applying with the number expected to increase further as we move towards a simplified application process.

**Retention**

RFWA is committed to being a high performing organisation by clearly linking individual effort and the organisation’s strategic direction. Effective management of the individual performance of employees is a key contributor to its organisational success. RFWA requires all employees to participate in performance management processes in order to:

- develop a high performing culture;
- ensure employees are aware of the standards of performance expected of them;
- recognise best performance; and
- identify and address capability development needs.

Regular informal evaluation between employees and managers is encouraged with formal performance reviews conducted annually.

After a short time of implementing the revised retention strategies RFWA conducted its annual employee survey to determine their level of satisfaction with the organisation. Results were encouraging with; 63% of employees expressing satisfaction with RFWA and 75% stating they were committed to contributing to the success of the organisation.

RFWA recognises that an integrated learning and development framework is fundamental to retaining staff and ensuring they have the skills to meet emerging challenges. The Department of Corporate Services is now focused on the design, development, implementation and evaluation of training to provide staff with relevant skills and to train new employees in current programs.

**Vincent Okumu**

*Human Resources Officer*
Kelmscott Community Options

Kelmscott is the first of four sites to be opened as part of the Community Options program of the Mental Health Division of WA.

This program was formed approximately six years ago where 30 patients of the Murchison Ward of Graylands Hospital and surrounds were identified as potentially suitable to be part of the program’s plan to return them to supportive accommodation within the community.

Four sites were identified - Kelmscott, Bentley, Mt Claremont and Osborne Park - and a program of community consultation was undertaken along with engaging family members with the transition process carried out by rehabilitation staff in the hospital.

Prior to the transition phase for the new Kelmscott residents, RFWA negotiated a Memorandum of Understanding with the Armadale Mental Health Services to formulate the collaborative relationship to enable a smooth transition to provide services to meet the needs of residents.

Coordination of this service was undertaken by Rob Rowe with a strong emphasis on recovery for residents who have had a history of long term institutionalisation now enjoying living in their new home in the community.

Supported Independent Living

The Supported Independent Living (SIL) program provides assistance to clients who now live independently in the community but may need a level of supportive contact during the week.

As a person settles into their own residence, the regular contact is vital as they may need support to develop routines for managing their home, cooking, shopping and finances. The service is coordinated and provided by Lauren Fricker and is greatly appreciated and valued by clients.

A similar support system has been initiated in both Bunbury and Busselton. When a client moves into independent living a staff member will arrange weekly contact and support until such time the client feels they can manage on their own.

Student Placement

Last year, RFWA commenced an initiative for University students to undertake work placements within the organisation. This was implemented in conjunction with Curtin University School of Social Work and Murdoch University School of Psychology.

Since inception, the programme has extended to include: medical students from UWA School of Psychiatry undertaking working placements, Registrars in Psychiatry seeking to expand their learning in services provided by non government agencies; and Social Justice students from the University of Notre Dame who will undertake projects within RFWA over an extended period.

Residential staff and outreach staff are to be commended for the positive support and guidance they have provided to students and visiting professionals to our sites.

Staff are very supportive and I felt much better in myself all around. I now feel healthy enough that I feel no problem looking for a job, a house and whatever I need. When my stay ended, I was able to secure accommodation and live independently. I have been off medication for my anxiety and depression ever since.

Andrew, Westminster Resident
Standards and Self Assessments

During late 2008 we commenced a Self Assessment Process at all sites with the Office of the Chief Psychiatrist, in a pilot project “Safety, Quality and Continuous Improvement of Mental Health Services to Consumers”. This has evolved to an annual process and addresses “8 Service Standards for Non-Government Providers of Community Services” with feedback on our Self Assessment Reports being very positive.

The Licensing Standards and Review Unit monitors the “Licensing Standards for the Arrangements for Management, Staffing and Equipment for Private Psychiatric Hostels”. Our sites are required to meet the Standards through an extensive annual assessment to ensure re-licensing. Site staff are also required to be licensed as ‘Approved Supervisors’ and this is reviewed annually. The Licensing Standards Review Unit conducts periodic site visits which focus upon particular areas of service Standards delivery. Feedback from the Unit may identify areas of service which require clarification and such matters are dealt with on a regular basis.

Recently we appointed an Occupational Safety and Health Officer, Martin Clark, who has completed the accredited formal training to comply with the provisions under the Occupational Safety and Health Act 1984. We will be seeking nominations for a representative from each site to assist in raising awareness and ensuring compliance with the OSH standards. Regular routine assessments and exercises will be conducted at all sites to ensure standards are being met.

The Council of Official Visitors maintain regular visits to all sites providing support or assistance to residents and assess services provided under their "Hostel environment check list". These visits can be unannounced and staff are happy to provide whatever assistance is required. Reports on each visit are received and any outstanding issues addressed.

Policies and Procedures are regularly reviewed to reflect changes in the services we provide, the change in the needs of the community and those of our clients both residential and outreach.

Warren Smailes
Executive Manager, Clinical Services
BUNBURY & BUSSELTON COMMUNITY SUPPORTED RESIDENTIAL UNITS (CSRUs)

The Bunbury and Busselton CSRUs opened in 2008 and are new initiatives that offer long-term accommodation with a recovery focus to assist individuals with the transition into independent living within the community.

The service is targeted at people living with a mental illness who have the capacity to maintain themselves within an accommodation with supported services.

Likely residents may:

• currently reside in a mental health inpatient unit due to difficulty in accessing this type of accommodation support; and/or;
• be homeless, at risk of homelessness or inappropriately housed; and/or
• live with elderly parents who can no longer provide the necessary care.

The CSRU programs will enable residents to:

• Access secure, affordable housing and support;
• Maintain and develop everyday life skills necessary for community living;
• Engage in community activities;
• Access appropriate services; and
• Achieve their maximum potential.

(source: COAG CSRU Service Guidelines 2009)

RFWA’s key principles have been embraced by the teams at Bunbury and Busselton. Programs have been developed for their residents to maximise their recovery and these programs are driven through person-centred planning.

The staff recognise and work with the individual’s needs and journey to plan their recovery accordingly. Where appropriate outside agencies are utilised to provide a broad range of recovery, education, personal and skill development activities.

The CSRUs saw the following developments over the last year:
**Bunbury**

In its first year, the Bunbury CSRU has had numerous success stories, which included:

We commence in July 2008 with eight empty units which were fully fitted out in two weeks including assembling all the furniture. The staff completed training in several areas including emergency response procedures and fire training.

Resident programs were developed based on the goals and needs of each resident. They include learning to budget, cook, take care of oneself, clean, access public transport, find work, further their education and interact with the community.

The Bunbury CSRU had numerous good outcome stories which clearly demonstrated to our staff that the program was already a success. The following are some of the achievements:

- Residents successfully planned an excursion to go fishing and swimming and organised all aspects of the trip taking into account safety, transport and activities. The day was a huge success.
- Staff and residents have been working on cutting back on smoking with some quitting and others reducing the amount they smoke.
- Residents learnt how to make arrangements to visit family in other towns, independently purchasing tickets and took transport there and back.
- Residents were taught how to budget and management their funds and pay their bills.
- The Bunbury staff commenced and are coordinating a new Hearing Voices support group.
- Four Residents graduated from the CSRU program and have moved on to independent living in the Bunbury community.
- Staff have been active in developing their skills and competencies through completing training in Recovery (Coleman), Hearing Voices, Pathways to Wellness, PART, Compass, Map of Loss, Gate Keepers Suicide Prevention, Occupational Health & Safety, Culturally Inclusive, Self Harm Awareness as well as attending Recovery From Psychosis, INTERVOICE and the Rural & Remote Mental Health Conferences.

**Busselton**

Like at the Bunbury CSRU, the residents of the Busselton program have been active in their recovery journey and participated in various activities, such as:

- Completing their certificate in horticulture through the TAFE Busselton.
- Entering a competition and winning a plot in the Busselton Community Garden and working with the TAFE instructor to secure a second plot.
- Conducting a car wash to fundraise for the Victorian Bush Fire appeal resulting in over $700 being raised.
- Involvement in the community tree planting project to provide homes for the endangered Ringtail Possum in the Ludlow forest.
- Volunteering at the Geografe Community nursery, local op shops, and Art Geo (Busselton Shire art gallery).
- Starting an appeal in the community for donations of music instruments to form a music group.
- Weekly cooking groups conducted by both staff and residents.
- Visiting Bunbury Hospital acting as mentors to patients in the Acute Psychiatric Unit.
- Instigating the Busselton Hearing Voices Group.
- Three Residents have felt ready to graduate from the program and have moved on to independent living. One of them has, for the first time in a very long time, begun a relationship with someone he met while on the horticulture course. It is a big achievement for him as prior to entering the program he would have never contemplated this.

Since launching, there has been significant progress in developing partnerships and collaboration as working closely with the local mental health clinic and community support services is instrumental in the success of the Bunbury and Busselton CSRUs.

We continue to work very closely with both the Bunbury and Busselton Mental Health Clinics and they in turn provide clinical support to our residents and staff. This year has seen the appointment of a CSRU Liaison Officer whose role is to support the CSRUs operationally and its staff and residents. This role also acts as a liaison between the CSRU staff and the Health Department.

**Graham Patullo**

*Program Manager*
CARER RESPITE PROGRAM

Richmond Fellowship Carer Respite Program is funded through the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA).

The program provides a range of flexible respite options for carers of people with severe mental illness particularly assisting carers of people with dual diagnosis; adults with an intellectual disability and mental illness who have complex and high support needs.

Under the carer respite program, priority is given to elderly parents 65 years and over (for Indigenous carers the requisite is 50 years) who live with and care for children (including adult children) with a severe mental illness and intellectual disability.

The team developed a significant range of recreational activities for care recipients including camping, fishing, walking, movies, cycling, walking or simply going out for a coffee.

The aim of the program is to give the carer respite by providing the care recipient with something enjoyable to do during this time. In addition to providing short term respite, the program aims to link care recipients into longer term support programs such as the Richmond Fellowship Personal Helpers and Mentors program (PHaMs).

One of our goals was to run five day respite camps at least once every two months. The aim of the respite camps was to provide carers with five days valuable respite where the carer could have a break for a week from caring for the care recipient. The care recipient on the other hand was engaged in a busy schedule of activities which encouraged them to exercise independence and to take greater responsibility for themselves in their daily routines. Mateship amongst participants was promoted as well as social interaction. All these factors contribute to recovery in the participants.

Thirdly, the aim of Carer Respite was to build a cohesive team of workers who could offer a flexible service to participants on a needs basis. Workers were inducted into the philosophy of Recovery and Richmond Fellowship and an emphasis was placed on employing peers, who have life experience of mental illness. The program also identified a need for female peer recovery support workers and efforts are being made to facilitate this.

The fourth aim of Carer Respite Program was to promote its services through various media to make the public aware of its services and to encourage their use. Library displays, promotion through emails, newspaper, radio and cinema advertising and through other sources was implemented to promote the service and increase the participant base.

Three respite camps were run in Margaret River. The success of the five day camps relate directly to their planning. A structured itinerary was put in place for each day and all activities were approved by the Program Manager, the Director of Services and the Assets Manager in relation to OHS and insurance issues. Participants on the camps have been able to form friendships with other participants, engage in activities within the community, exercise greater than usual independence and responsibility and experience activities which are life enhancing.

I thank you all for the amazing care, friendship and support you gave to our son, Chris, while he was living at your respite house. He has progressed along the path to recovery so well. Thank you once again.

Chris’s parents
One participant experienced a sun rise and a sun set in one day – something he had not done since he was a child and this was a huge event for him! Other participants enjoyed the peace and solace of Lake Cave where they sat in silence as the tour guide put on a light show. Another participant who suffers from Obsessive Compulsive Disorder, attended a camp (a huge step forward in itself) and managed to see the end of the five day camp living with six other people – something he would find very difficult to do in his every day life. Participants, some of whom did not normally get up until 1:00pm were up by 8:00am ready to participate in activities and all participants enjoyed a level of independence that they normally did not experience in their everyday lives. The other positive aspect was that all participants were compliant with their medication and no serious incidents occurred on any of the camps that required incident reporting.

Many participants have been making progress through the day respite program. One participant who found it difficult to interact with other people, now has little problem socialising with others. This can be attributed to being involved in the respite where he engaged in group activities and he went one step further and attended a respite camp.

Another participant was very determined to stick to the same routines during respite activities. With gentle encouragement, he gradually became more flexible and began engaging in activities outside of his comfort zone. This participant is now involved in a variety of activities and also attended a respite camp. The Red Cross Commonwealth Carelink and Carer Respite Centre funded him to buy some walking clothes. Each time this participant is visited for respite activities he is wearing the same walking clothes which he obviously is grateful for.

Day respite is making a difference to those who participate. Participants are taken out of situations where they have often become self-isolating and encouraged to partake in activities within the community where they have the opportunity to engage socially and interact with people outside their normal circles of influence. Participants often find the activities enjoyable as they select what they want to do. A participant once said: “You make me feel like a human being” in response to a meal of fish and chips being purchased for her.

Carer Respite is a recovery tool that helps promote wellness in participants by bringing normality into the often disorganised isolated lives of people suffering from mental illness.

Alastair Miller
Program Manager

Theodore’s Story
My Recovery didn’t really start until I moved into Richmond Fellowship about a month ago. Before that I was drinking excessively. I had just lost my job and had moved into a lodge above a pub away from my family.

Since I moved into Richmond Fellowship, I have stopped drinking excessively and I have also started going to Tafe. More importantly, I have started to learn more about myself and why I do the things I do. I am a creature of habit and breaking my detrimental habits has not been easy. I still drink, but I no longer drink until I pass out. I still spend too much money but I always have money for food and rent. I am not working but I am studying and looking for work. So personally I am pleased with my Recovery process.

My Recovery began at Richmond Fellowship due to the help, understanding and support of the workers and other tenants and I am extremely grateful for their help.
PERSONAL HELPERS & MENTORS PROGRAM

It is estimated that there are 53,000 people in Australia who have a mental illness that are not in receipt of any mental health service assistance.

The Personal Helpers and Mentors (PHaMs) program was introduced across Australia in 2007 to target approximately 11,000 of these people nationwide. The program is an outreach service federally funded by FaHCSIA (Department of Families, Housing, Community Services and Indigenous Affairs) and developed to support people experiencing a severe mental illness with subsequent functional impairment.

The core aim of the PHaMs program is to target people who ‘fall through the gaps’; those who may not yet be diagnosed or finding it difficult to access services.

PHaMs programs provide peer support, recovery planning, goal setting, lifeskills training and connects consumers with relevant service providers specific to their needs. An individualised and person-centred recovery approach is promoted that offers hope and confidence by encouraging consumer choice and participation.

The program was launched in January 2008 by RFWA at their Bentley and Swan service regions. The teams comprise of highly qualified staff, whether by a lived experience, industry experience or a tertiary qualification, with both locations having a Program Manager.

Since launching the PHaMs program, both teams have been busy developing and implementing the program and raising its awareness. An initiative introduced to assist in attracting program participants was the production of an advertisement to be shown in public forums, along with advertising banner and information brochures. The presentation can be viewed at www.rfwa.org.au(1).

Inter-agency cooperation was highlighted as a goal to assist program participants with person-centered planning. It is important to ensure that all key stakeholders are supportive and engage positively in assisting participants to achieve their individual goals. Interagency meetings, case management and care meetings are strategies being implemented to increase inter-agency awareness and cooperation. So far the results are deemed successful.

Staff training is a constant priority for PHaMs with staff being encouraged to attend relevant training that will provide them with increased resources, mental health tools, knowledge and insight to assist program participants. It also serves to keep the flame of hope and belief the staff have in each participant’s ability to reach and attain good mental health.

Joshua Davidson and Josie Scata
Team Leaders, Swan and Bentley

RICHMOND FELLOWSHIP EDUCATION PROJECT

The RFWA Education Project supports the organisation’s innovative approach to recovery by creating recovery based training programs for the mental health sector. The key objective of this project is for RFWA to build a critical mass of mental health workers, both in the organisation and external agencies, who understand the concept of recovery and utilise recovery-based skills and values in their field.

The following strategies have been identified to further develop the project:

1. RFWA to negotiate a collaborative ‘delivery partnership’ with an Australian tertiary institution.
2. RFWA personnel to undertake study in Certificate IV Training & Assessment qualification with Training Services Australia.
3. RFWA personnel to contribute their expertise to assist in the development of new compulsory ‘recovery content’ in the Certificate IV Mental Health qualification in collaboration with Australian tertiary institutions.

By playing a key role in curriculum development and training delivery, RFWA will secure its place as an innovative organisation, a leader in the sector and an influential voice in shaping educational policy.

Alastair Miller
Program Manager

Sandra Duncan
Project Officer
The key objectives for Recovery Education have been in the areas of improving recovery planning by the use of appropriate tools, key work and the writing of the key work reports.

An additional objective was to identify the different roles undertaken by support and recovery workers so that relevant training could be offered at an appropriate level.

By December 2008 the following progress had been made;

- Re-design training programs to suit student needs for practical ‘tools’, whilst maintaining essential component of education in critical understanding of MI and orientation towards recovery principles
- Design an evaluation process for training delivery
- Recovery Education to work more closely with Site Co-ordinators to standardise the framework for recovery practices.
- Recovery Education to deliver basic counselling skills training on-site
- Work place training and assessment
- In offering external training a framework of competency standards, relevance and validity was established

There has been improvement across most sites in the understanding of the significance of recovery planning for the purpose of reclaiming ‘life competencies’.

Recovery Education has introduced the Holyoake model of group facilitation to Site Coordinators, essentially a self help model with a trained facilitator to guide the process, with positive feedback being received by Site Coordinators and facilitators.

In summary, the Workplace Training is assisting to identify how the recovery training program in RFWA can be further improved so that it delivers competency-based skills training as well as knowledge-based teaching.

David Rivett
Program Manager for Recovery Education

Anthony’s Story

Anthony began his Recovery journey with Richmond Fellowship in 2005 following his discharge from Kalgoorlie Hospital. He was a resident at East Fremantle for just under two years before he moved onto the Hilton service. Before joining Richmond Fellowship, Anthony was a heavy drinker and experienced negative voices. In his time at East Fremantle his Recovery progressed in leaps and bounds as he abstained from drinking, quit smoking and became independent of the public trustee. He is now working full time as a car detailer and is actively saving so that he can find private accommodation after he moves on from Hilton.

Anthony tells his story here.

Hi, it’s Anthony. In December 1997 I was diagnosed with schizophrenia. I suffered from hearing thousands of voices in my head all at once. On top of that, I was also a heavy drinker and smoker. In February 2005 I was put into a ward at Kalgoorlie Regional Hospital and I spent everyday having blood tests, x-rays and scans. By October, I had stopped drinking alcohol but I was still smoking. I joined Richmond Fellowship around November 2005 after being discharged from Kalgoorlie. I spent a while getting to know Fremantle and my way around on public transport. After a while, I started to notice how much money I was losing on tobacco and cigarettes. It was then that I tried to give up smoking. First I tried Nicorette chewing gum and it only worked for about a week so I went to the doctor and went on Zyban tablets. I still had a cigarette now and then but after about two weeks I just stopped altogether because I’d lost the desire for it.

I tried some college courses, but I didn’t really do that well, so I decided to start job hunting. First I registered with the job agency Workright and they gave me an interview about once a month. One Saturday I was in the central Fremantle business district and I met a lady called Suzette who told me about the Revival Fellowship in Yangebup. I decided to go along the next Friday. It was at the Revival Fellowship that I met John Green, who is in the business of getting people jobs. His company is called South Metro Personal. A few months after I signed up with him I got work for one day a week at a fishing tackle factory. After a while I was moved to the Jarrah Select wood yard and sawmill and I worked there as a packer for approximately three months. One day the sawmill broke down and needed maintenance so the company found me another job with Ace Auto Clean as a car detailer and I have been there ever since.

I started the job with Ace Auto Clean about a month before I moved to Hilton. So far, my job has earned me my laptop and my 5-in-1 machine. I’m planning to get wireless Internet for my laptop in about two weeks and I’m just waiting for my wireless modem. Then, all I will need to do is assemble my 5-in-1 machine ready to use when I move into my Fremantle Housing house where I’ll have my own telephone line. I’m also saving for a holiday to the United States with my mother.
METROPOLITAN SERVICES

As Program Manager of RFWA metropolitan residential and outreach services, I have had the pleasure of participating in our continuing efforts to improve services to consumers and positive outcomes for their families and the community.

Metropolitan Services integrates key elements of recovery with accommodation, basic counselling and support services including practical daily living skills. Formal education and employment has been a crucial element in stimulating the recovery process.

In addition, recovery groups have been a particular success which provides consumers with a forum to engage with others and share information and opinions on life and mental health issues. Due to the current economic climate, securing employment and future permanent accommodation has been problematic for our residents.

The guiding principle that the consumer is at the centre of everything we do has been embraced by all at RFWA.

We have established significant goals for programs and outline the following key performance results:

- Training of staff in the practice of the ‘Recovery Model’
- Providing support and encouragement to Consumers to become involved within the local community such as volunteering in local garden centre, animal shelter etc
- Utilisation of the ‘consumer intake and decision support system’ to explore support options for prospective consumers
- The implementation of a Consumer Survey which has reported Consumer satisfaction has increased for both new and long term residents
- Cooperation with government and community organisations has strengthened
- Developed a partnership with Palmerston to improve services for people with a dual diagnosis
- Established links with key personnel in local clinics, Government committees, peak bodies and key community stakeholders
- Supported enhanced employment and training opportunities for all staff
- Revision of the RFWA Policy & Procedures Manual to an online information tool to streamline administrative processes and provide greater clarity
- Developed additional internal communication activities including staff forums, weekly newsletter, CEO updates and staff meetings
- Training of Site Coordinators to support our recovery philosophy and support workers
- Implementation of a Staff Survey

Our goal for the next year is to continue to improve consumer satisfaction and build partnerships across Government and community organisations. Supporting RFWA staff and managing workloads is another priority to ensure that delivery standards are maintained.

I would like to personally acknowledge the efforts, dedication and commitment of all RFWA staff members.

Dusa Tokic
Program Manager
HEARING VOICES NETWORK

The Hearing Voices Network Australia (HVNA) is a collection of Hearing Voices Groups and affiliated members working to promote recovery, acceptance and education to consumers and clinicians to those who hear voices, see visions, and other like experiences. The key aim of HVNA is to reduce anxiety, ignorance, stigma and isolation about hearing voices, and offer support to those who hear them.

The overarching role of the Hearing Voices Network Australia is to enable acceptance and recovery for people who hear voices through support for self-help groups, education and awareness.

Self-help support groups are of significant importance to Voice Hearers. There are currently seven hearing voices groups in WA, with Joondalup, Busselton and Queens Park having commenced this past financial year. More groups are set to start early next year including a Young People’s HV Group.

The education component of HVNA is on the increase. A two-day workshop entitled the Hearing Voices Awareness Workshop was held five times in the first six months of 2009. The workshops were well attended, and the evaluation forms reflect that this type of training is in high demand for mental health workers working with Voice Hearers.

Awareness of HVNA is slowly increasing mainly due to the Recovery from Psychosis Conference as well as the annual INTERVOICE meeting, both of which were held in November 2008 (refer to page 20). As a result, the number of enquiries related to working with voices has increased significantly. Various organisations throughout Western Australia have requested assistance with staff training to undertake voices work, as well as setting up groups in their local areas.

HVNA has received substantial donations from Hywel Davies (UK), which has allowed for the reproduction of the Information Booklet and Coping Strategies poster. Both publications are in high demand by consumers, family and friends and health workers. HVNA has also received two grants from the Mental Health Council of Australia; one for developing a new website; and the other to assist with the development of a new Business Plan with both projects being completed.

Regrettably, HVN Lotterywest project funding ceased 30th June 2009. However, fortunately Richmond Fellowship WA recognises the importance of the work done within the Network and will continue to sponsor the HVNA.

Marlene Janssen
Coordinator
Keith came to Richmond Fellowship with the harsh label of the ‘third most complex case in Perth’. He had a long history of violent outbursts, self harm and frequent psychotic episodes. He was perceived as unable to regulate his emotions and was clearly struggling with his experience of hearing voices.

Having been moved from service to service mainly due to the facilities not having the resources to accommodate his complex needs, and being hospitalised numerous times, Keith was unfortunately perceived as one who ‘could not recover’

In June 1998, Keith was relocated to Richmond Fellowship Pepperwood service in Bassendean, a facility that provided 24 hour service. In time, it was encouraging to see significant improvement in Keith’s condition as he became more independent and stable. In just two years, staffing hours were reduced and overnight supervision ceased. Keith has not been re-admitted to a psychiatric hospital since.

Through use of the Recovery model and person-centered planning, Keith’s achievements continue to mount. Keith now works four days per week, maintains most aspects of his home independently, has joined a gym and is planning his ‘dream’ holiday to Queensland.

Today Keith is living a functional and fulfilling life and engages in the community. He is confident to make decisions and most importantly, his self esteem, self perception and confidence has greatly improved resulting in a positive outlook on life.
RECOVERY FROM PSYCHOSIS CONFERENCE

3-5 NOVEMBER 2008

A Recovery from Psychosis Conference was organised by RFWA, to utilise the expertise of international delegates to increase knowledge and awareness to mental health workers and consumers in Australia. The three day Conference held at the Perth Convention Centre was attended by over 350 people and had an enormous and positive impact on people working within the mental health system.

**Keynote speakers at the event included:**
- Dr Helen Milroy (Australia)
- Jacqui Dillon (England)
- Dr Sandra Escher (The Netherlands)
- Dr Dirk Corstens (The Netherlands)
- John Watkins (Australia)
- Ron Coleman and Karen Taylor (Scotland)
- Professor Dr Marius Romme (The Netherlands)
- Lyn Mahboub and Marlene Janssen (Australia)
- Trevor Eyles (Denmark)

The topics of their presentations and additional Master Classes ranged from Hearing Voices and the complexity of mental health issues from an Aboriginal perspective, hearing voices with children, an understanding of psychosis, what helps and what hinders the recovery from psychosis, and working with voice hearers in social psychiatry. Videos of the keynote presentations are available from our website at www.rfwa.org.au.

RFWA and the HVNA have received significant feedback from workers, consumers and carers alike, to share their enthusiasm and appreciation of an agency willing to “throw” this challenge to those working within the mental health system.

INTERVOICE 2008

(The International Network for Training, Education and Research into Hearing Voices)

Perth hosted the 6th Annual INTERVOICE meeting which notably was the first time the event was held outside Europe. This was a two-day event running from 7 November with the “Mad Pride” launch function being held the evening prior. With over 110 registrations, the event attracted a large number of delegates from overseas. Countries represented included Holland, England, Scotland, Wales, Spain, Belgium, Denmark, Germany, Palestine, Japan, Italy and New Zealand, as well as a number of Australian delegates.

A number of Voice Hearers from around the world presented their stories and discussion groups were convened where various topics and issues on the hearing voices experience were discussed. An overview of research was also covered at the conference. The program also included an introduction to the ‘Open Space’ concept where anyone could introduce a topic for discussion and invite others to participate in their discussion. The concept was well received and feedback continues to be positive. Official international delegates provided reports on progress and events that had occurred in their respective country’s Hearing Voices Network.

The “handing over the baton” ceremony took form in the way of an Australian quilt donated to INTERVOICE being passed to the Dutch contingent, who will be hosting next years’ INTERVOICE meeting in Maastricht in September 2009.
RICHMOND FELLOWSHIP
CONSUMER SATISFACTION SURVEY

In 2009 we conducted a survey to collect information on consumers’ perception of the services and support provided by RFWA residential rehabilitation programs. The survey provided the opportunity to acquire consumer feedback on their expectations of RFWA staff and recovery programs, what they liked or disliked about the services and what changes they would like to see in the future.

To review the detailed Survey Results please visit our website at www.rfwa.org.au.

The following is an excerpt from the Resident Survey Results from programs across the metropolitan and regional areas. Questionnaires were distributed in May 2009 to all RFWA residents with an invitation to complete, with a 65% response rate being achieved. The following is a summary of the collected information:

1. Demographic Information
A majority of RFWA residents are male with a weighting to the 25-40 age bracket. The average length of residency is less than one year.

2. Confidentiality
The majority of residents feel that their personal information at the RFWA was kept confidential. Most residents responded that staff required to access to their personal file, while 4% expressed the wish that no one at RFWA accessed their personal file. Furthermore, most residents felt comfortable with access to their own files compared to 2% who reported having no access to their files.

3. Grievances/Complaints
Of all RFWA consumers who have placed an official complaint about at RFWA, the majority reported being pleased with the actions taken and outcome. Most RFWA residents felt comfortable in being able to talk to RF staff, with this option being their first choice in dealing with grievances/complaints.

4. Decision Making
Residents responded favourably in being involved in the decision-making process on:
- Chores/Rosters (63%)
- Visitors (57%)
- Getting up in the morning (55%)
- Diet/Meals (55%)
- Outings (53%)
- Day Programs (51%)
- Contracts (51%)

5. Accommodation/Living Conditions & Privacy
a) Majority of residents reported being always or most of the time satisfied with the following living conditions:
- Bedroom (75%)
- Toilet/Bathrooms (71%)
- Lounge (71%)
- Smoking Area (67%)
- Kitchen/Dining (69%)
- Games room (53%)

b) The Majority of residents responded that their privacy in their bedroom; bathroom and toilets as being respected by both staff and other residents. They also reported that staff and other residents respected their decision to be alone.

6. Staff Support & Availability
Majority of residents have some understanding or fully understand the job of the Program Manager. Furthermore, most of residents responded that Program Manager as being always or mostly available for contact.

In addition, residents responded to:
- Always or mostly satisfied with staff support (87%)
- Informally catching up with the key worker on a daily and weekly basis (82%)
- Always or mostly having enough contact with the key worker (81%)
- Always or mostly satisfied with the staff support in order to achieve personal goals (76%)
- Key-work sessions taking place daily few times each week or weekly (65%)
- Needing more staff contact (65%)
We wish to express our gratitude to the following groups who donated their time to assist Richmond Fellowship of WA in continuing its journey forward. We thank you for being part of our success through your involvement and support.

- Board of Richmond Fellowship of WA
- Richmond Fellowship of WA Foundation Board
- Program participants, their carers, relatives and friends
- Staff and volunteers

**Regular Supporters**

- Armadale Mental Health Unit
- Australian Taxation Office
- Bentley Health Service
- Council of Official Visitors
- Curtin University – School of Social Work
- Department of Housing
- Graylands Community Options team
- Graylands Murchison Ward
- Local Government authorities
- Lotterywest
- Mental Illness Fellowship of Western Australia
- Midvale Neighbourhood Centre
- Office of Chief Psychiatrist
- Perth Home Care Services
- Rockingham Kwinana Mental Health Service
- Swan Adult Mental Health Clinic
- The Commonwealth Department of Health and Ageing
- The Disability Services Commission of WA
- The Government of Western Australia
- The Office of Mental Health
- Western Australian Association of Mental Health

**Contractors, Suppliers and Donors**

- Accord Insurance Business
- Ace Plumbing and Gas
- Adcorp Corporate
- Alinta Gas
- Amanda Fay Communications
- Amcom
- Amtech
- Australian Taxation Office
- Benmark Foundation
- Boylan, Simpson and Simpson
- CentreFord
- Chubb Electronic Security
- Command-A-Com
- Corporate Express Australia
- Customfeet
- DiskBank
- Fire and Emergency Services Authority (FESA)
- Food for Me
- Mr Gareth Dickson
- Haddington Resources Ltd
- Harvey Norman
- J & K Hopkins Office Furniture
- June O’Connor Centre
- Kick the Dog
- Mazzega’s Mitre 10
- Miss Maud’s – Cannington
- MitreFinch

**Educational Institutions and Training Groups**

- Central TAFE, Perth
- Curtin University School of Occupational Therapy
- Edith Cowan University Bunbury School of Social Work
- Murdoch University School of Psychology
- Notre Dame University School of Social Justice
- University of Western Australia School of Social Work
- West Australian Council of Social Services

**HOW YOU CAN HELP**

Make recovery your priority, too! Our vision is to be at the forefront in providing innovative and person centred environments for recovery. There are numerous ways in which you can make a contribution and join the effort to assist people recover from their mental illness. To discuss your participation, please call us on 9258 3060 to speak with our staff.

To make a donation or to find out how you can support our programs, please visit our website at www.rfwa.org.au for more information.

Thank you for your support.
My Recovery began at Richmond Fellowship due to the help, understanding and support of the workers and other tenants and I am extremely grateful for their help.

Theodore