

WELCOME

Kia ora tātou

Ko Fiona Anderson toku ingoa

Nō Scotland ahau

Kei Tāmaki Makaurau, Aotearoa ahau e mahi ana

Tenā koutou katoa



LETTING GO

WHY, WHEN AND HOW

WHY WE NEED TO “LET GO”



WHY (CONTINUED)


CAPA foundation is:

- Do the RIGHT THING
- At the RIGHT TIME
- With the RIGHT PEOPLE


If we fail to let go it is impossible to do any of the above



WHY (CONTINUED)

- Letting Go empowers young people and their families
 - Supports the young person and their families access community resources
 - Gets a Mental Health Professional out of their life
 - Supports Recovery and allows the young person to move forward with their life
 - Recognises the young persons and the families strengths
 - You may be doing more harm than good
 - Supports Independence rather than dependence
 - Demonstrates your trust in the process
 - Demonstrates to the client you do what you said you would
- 

BARRIERS TO LETTING GO

- Ongoing risk issues
 - Complexity of the presentation
 - The clinician likes the young person and their family
 - The family want to remain in service “just in case”
 - The clinician is feeling a little burnt out and the thought of working with someone new is causing distress
 - The clinician does not have confidence in other services or is concerned there may be a wait list
 - Clinician does not have time to complete required paperwork
 - CAPA Foundations “Easy in, Easy Out, Easy Back”
- 

WHAT MAKES IT EASY TO LET GO

- When the young person declines further input
- When the young person and the family do not attend
- When the family move out of area
- When the partnership clinician is going on extended leave or is leaving the service
- When there is discharge plan in place
- **When the Partnership Goals are complete**



SOME TIPS TO HELP LETTING GO

- Use a Session Rating Scale – many available
- Visit the goals regularly and have a check in with the young person and family
- Ensure the goals are not too lofty
- Utilise other agencies expertise
- Regular Letting Go days
- Regular Caseload review
- Discuss in MDT if you are feeling stuck
- If not making progress discuss in MDT consider
 - Are you a good fit (are you “the right person”)
 - Is the young person not ready for work (is this “the right time”)
 - Are you using an evidenced based intervention (are you “doing the right thing”)




SOME TIPS TO HELP LETTING GO (CONTINUED)

- Transition Plans
- Therapeutic contracts
- Ongoing home work
- Information sheets
- Develop good relationships with community providers
- Self Help websites or apps

CASELOAD REVIEW

- Every 6-8 weeks
- Partnership Clinician, Senior Clinician and SMO
- Every client has a completed case load review form completed
- Sections of the form are “bookmarked” and populate letter

This supports the partnership clinician by:


- Sharing /mitigating risk
 - Focusing on the goals of the client and family
 - Suggestions for community resources
 - Sticking to the knitting/stay in your lane
- 

CASE LOAD REVIEW

| Case Load Review | | |
|--|----------------|---------------------------------|
| Date of CHOICE | Date of Review | Number of Face to Face Contacts |
| Top Problems as identified by client and family | | |
| Partnership Goals | | |
| How were these goals to be measured? | | |
| Interventions offered | | |
| Progress (what has worked what has not) | | |
| Letting Go Plan (consider ongoing homework, EWS, Medication Review) | | |



LETTING GO DAYS

- Held every quarter
 - Keeps Letting Go as a focus
 - Seniors/SMO available for consultation
 - Admin Team Focus on closing
 - Time to complete required documentation
 - Prizes offered
 - Random Act of Kindness
- 



REMEMBER

*Sometimes letting go
is an act of far greater
power than hanging
on*

Fiona.Anderson@waitematadhb.govt.nz

