**Spectrum 2022**

**Snapshot 2021-22**

**Our impact**

**Treatment**

* Individual clients in treatment increased by 52%.
* Assessments conducted by Spectrum increased by 24%.
* Total referrals increased by 32% with regional referrals more than doubling.

**Workforce development**

* Spectrum delivered 124 online and face-to-face training events with a total of 4,147 participants.
* As part of the National Training Project (NTP), Spectrum delivered 18 two-day courses across all states and territories with 324 clinicians trained.

Feedback from the Spectrum 2021 Conference:

* 88% of delegates were ‘highly’ to ‘very highly’ satisfied with the conference presentations.
* 87% of delegates felt the conference was ‘very’ to ‘extremely’ relevant to their work with people with personality disorder.
* 96% of delegates would recommend the Spectrum Conference to their colleagues.

Feedback from the mentalization-based treatment workshops:

* 95% of delegates were ‘highly to ‘very highly’ satisfied with the workshops overall.
* 97% of delegates would recommend the workshops to their colleagues.

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**Welcome**

Welcome to Spectrum 2022, where we lookback on some of Spectrum’s many achievements in 2021–22.

Spectrum continues to be a key leader in treatment, research and education with respect to personality disorder and complex trauma at both a state and a national level. As a result, its international reputation has expanded extensively. As a result, its international reputation has expanded extensively.

A substantial number of major achievements have been made by Spectrum over the past 12 months and many exciting opportunities lie ahead. Congratulations to all Spectrum staff, partners and collaborators on their ongoing leadership and exceptional work in this area.

This year, Spectrum successfully completed its two-year national training initiative that recognises its unique position at the forefront of workforce development in responding to personality disorder.

The initiative, funded by the National Mental Health Commission, involved the delivery of multiple training courses in all Australian jurisdictions and capital cities. This work supports improved care for consumers through the ongoing development of a strong and capable workforce at a national level. Spectrum has made significant enhancements to its online training delivery which now ensures that workforce development opportunities reach even more community members and health professionals both across Australia and internationally.

Our clinical teams, inclusive of our lived experience staff members, work together utilising their advanced skills, knowledge and expertise to ensure that community members have access to the best possible treatment, care and support. Spectrum continues to expand the range of treatments and new approaches available to the public and private health and primary care sectors.

The continued growth and impact of Spectrum’s national research credentials contribute to its commendable reputation for developing responses to complex issues concerning personality disorder and complex trauma through building the evidence base for best practice.

Federal and state governments seek out the expertise Spectrum has to inform policy at the respective levels which in turn, influences the state and national service delivery models.

As the recommendations arising from the Royal Commission into Victoria’s Mental Health System are implemented, Spectrum is ideally placed to play a central role in shaping the future of service responses to personality disorder and complex trauma.

As a truly high performing centre of excellence, we are proud of the services Spectrum provides and look forward to it contributing to the delivery of the Eastern Health strategic initiatives of healthcare excellence, leading in research and innovation, and leading in learning in the area of personality disorder and complex trauma.

David Plunkett & Paul Leyden

*“As the recommendations arising from the Royal Commission into Victoria’s Mental Health System are implemented, Spectrum is ideally placed to play a central role in shaping the future of service responses to personality disorder and complex trauma.”*

**Introduction**

The past year has been significant for Spectrum. In an effort to innovate, we developed a hybrid model of care, bringing together online and in-person treatment delivery. Despite restrictions posed by the COVID-19 pandemic, our consumers and staff have been agile in their efforts to access and deliver services.

In 2021-22, our referrals grew by 32% and clients in treatment increased by 50%, underscoring the critical need for our services. To amplify the voices of people with lived experience, we welcomed three new staff members to our Lived Experience team. In addition, Spectrum’s expertise was recognised when a record three symposia were accepted to the Royal Australian and New Zealand College of Psychiatrists (RANZCP) 2022 Congress.

The successful delivery of the inaugural Spectrum Research Forum and the initiation of the Personality Disorder and Complex Trauma Research and Innovation Centre emphasised Spectrum’s commitment to translational research aimed at uplifting capability across the mental health sector to care for individuals with experience of personality disorder or complex trauma-related adverse mental health outcomes.

The annual Spectrum Conference established our capacity to lead the adoption of new treatment strategies in our field. Furthermore, our research has resulted in a number of publications.

We also delivered training to more than 4,000 participants throughout Australia to ensure more consumers have access to evidence-based care. Our statewide Personality Disorder Initiative (PDI) demonstrated our ability to lead cultural change.

The launch of the Online Personality Disorder and Complex Trauma ECHO (Extension for Community Healthcare Outcomes) cultivated a community of practice for Victorian health professionals, embracing the ECHO philosophy of, “Everyone can teach, and everyone can learn from each other.”

Spectrum has worked with people who experience complex and developmental trauma for more than two decades. In 2022, the 11th edition of International Classification of Diseases (ICD 11) introduced a new diagnosis of complex post-traumatic stress disorder (CPTSD). Until now, CPTSD was considered as part of borderline personality disorder (BPD). With this change, about 50% of people with BPD will receive an additional diagnosis of CPTSD. This will put a spotlight on trauma treatments for people accessing services from Spectrum.

In recognising this new development, Spectrum has embraced the change by updating the brand’s tagline – the revised language now highlights that Spectrum specialises in personality disorder and complex trauma.

The work that we do would not have been possible without the support of people with lived experience, Spectrum staff, and our collaborators and partners across public, private and primary health care sectors.

We look forward to continuing our contribution and leading change for people affected by personality disorder and complex trauma.

A/Prof Sathya Rao & Anthony Denham

**Consumers and carers**

**Expanding Spectrum’s Lived Experience workforce**

Reaffirming a commitment to value the knowledge of people with lived experience of personality disorder and complex trauma, Spectrum has embraced the recommendations of the Royal Commission into Victoria’s Mental Health System and expanded its lived experience workforce.

In March, Spectrum welcomed three new Lived Experience team members to its workforce: Dani Jaeger and Jacinta Emery, provide consumer perspectives, and Tricia Fitzpatrick, provides another carer perspective to the team.

Guided by the principles of co-production and co-design, the Lived Experience team works alongside Spectrum clinicians to embed its expertise across the organisation. By creating a lived experience workforce within the service, Spectrum is uniquely positioned to establish a firm foundation to better support people with BPD.

In May, Spectrum's Lived Experience team, Carer Consultant, Rita Brown, and Researcher, Jillian Broadbear, reflected on how the inclusion of lived experience had impacted the way they work and the services the organisation provides.

The symposium, Spectrum’s Lived Experience Panel: Putting co-production and co-design principles into practice, saw Jacinta Emery and Dani Jaeger deliver a moving presentation on the importance of co-production and co-design, while underscoring the challenges and learnings experienced throughout this approach. Jillian Broadbear and Rita Brown, reflected on how the inclusion of lived experience had impacted the way they work.

The team’s expertise continues to be sought for research opportunities. The landmark project, Care pathways for management of borderline personality disorder at Eastern Health emergency departments, was born out of an identified need to increase understanding of BPD and its symptoms by emergency department (ED) teams, to improve the ED experience for people with BPD. The recognition of the unique contribution of lived experience featured highly in participants’ feedback.

The perspective of the Lived Experience team is also offered at various Spectrum training workshops to complement the work of clinicians. Lived experience involvement elicits positive feedback, reflecting the immeasurable value of centring these voices at Spectrum.

After one workshop, a participant wrote, “I loved that a person with lived experience was part of the whole workshop and contributed so openly … thank you, I learned a lot from you.”

Tricia Fitzpatrick contributes her lived experience perspective to Spectrum’s carer workshops, joining current facilitators, Rita Brown and Jo Veltkamp. They also run a monthly carer support group. These avenues provide much needed information, support and hope to family members and those in a carer or supporter role of people living with BPD. Ongoing review and consultation is planned to assess whether the current support group is meeting carer needs.

Rounding out a year of successful collaboration, the Lived Experience team co-developed an informative brochure, What is borderline personality disorder. This valuable resource is informed by lived experience expertise and provides a concise overview and understanding of BPD, with the aim of it being utilised by people who are newly diagnosed and their community.

*“I loved that a person with lived experience was part of the whole workshop and contributed so openly … thank you, I learned a lot from you.” – Spectrum training workshop participant*

**Consumers and carers**

**Peer-led research**

The evaluation of a Spectrum program which offers support and psychoeducation to carers, including family, friends and supporters, of someone living with a diagnosis of BPD was published earlier this year.

The program and paper, Assessment of peer-conceptualised, written and led single-session group interventions for carers supporting a person with borderline personality disorder, was written and facilitated by our carer consultant with the assistance of an experienced clinician.

The paper reinforces that carers supporting someone with BPD have their own challenges and they require education and support.

At present, a manual is being written with the goal that it will be utilised by area mental health services to increase their capacity to deliver additional workshops to carers. This undertaking highlights Spectrum’s belief in the importance and value of peer-to-peer intervention

**Integrating a carer perspective: Tricia Fitzpatrick**

An important shift is finally unfolding in mental health. As part of the reforms recommended by the Royal Commission into Victoria’s Mental Health System, lived experience is now professionally recognised in its own right. The voiceless are now being heard.

When Spectrum committed to developing a Lived Experience team, I was attracted to join to further represent the perspective of carers. I came with my many years of supporting a family member who had been diagnosed with BPD. Like so many carers navigating the mental health system, I had been largely disenfranchised.

Authentically collaborating with clients and carers has been long awaited. Embedding and integrating lived experience is the empowering recalibration which is so needed in mental health.

I would never have considered that one day I would be at the vanguard of the lived experience movement. I look forward to the development of my role, and that of my team, as we identify how to effectively use our expertise to ensure mental health services are more responsive to the needs of the people who access our service

*“Spectrum has taught me life skills to not only help me in my medical career, but day-to-day life. I now function with more ease, calmness and peace which is honestly a place I never saw myself being.”*

**Consumers and carers**

**Jac’s story**

The goal I had for the Acceptance and Commitment Therapy (ACT) program was to gain a sense of self, clarity, identity and improve my self-esteem.

After just 12 months, I can now confidently say that I have developed clarity on my identity and improved self-confidence in who I am. Where I’m currently at is a clear expression of the values and vision I have for my life, and I feel more stable within myself.

Reflecting upon where I had started at the beginning of this program, I was utterly depressed, anxious and in a viscous cycle of self-harm. I was disempowered and hostage to my own high expectations of myself.

Through this program I have learnt the practice of self-compassion and empathy. I have also learnt the practice of self-awareness, acknowledgment, acceptance and committed action – practices and skills that I will carry for the rest of my life.

Spectrum was a stable support system in my life, something that I was lacking. I now have the confidence to step outside my comfort zone more regularly and to get somewhat comfortable with being uncomfortable. This includes going out with friends and reaching out to my mother and family for support.

Spectrum has taught me life skills to not only help me in my medical career, but day-to-day life. I now function with more ease, calmness and peace which is honestly a place I never saw myself being.

I wholeheartedly thank you for accepting me into your ACT program.

**Consumers and carers**

**Chloe’s story**

I had the opportunity to work with the Spectrum team from January 2021 through to April 2022 in their dialectical behaviour therapy (DBT) program. This was following the diagnosis of my personality disorder. I was excited to have the chance to learn new skills to help aid me in my recovery and threw myself into the work headfirst.

I worked with a fantastic team who helped me identify and work towards what previously felt like unachievable goals of mine.

Spectrum did an amazing job in helping me reach my potential by introducing me to a wide range of skills and techniques. They encouraged me to practically apply relevant skills and talk with the team or my one-on-one worker.

My team really took the time to get to know me and made me feel truly supported. Spectrum became a great source of community for me, where I could feel the care and respect given to me by every single staff member I encountered.

During my time at Spectrum, I felt like I finally regained some control and, more importantly, confidence in myself again. It was empowering to know how far I had come in the last year, and it was even more empowering being able to assure myself that I now have the tools to cope with whatever the future has in store for me

**Treatment**

**Pilot identified the benefits of online psychoeducation**

Our online psychoeducation pilot identified benefits for individuals recently diagnosed with BPD. As part of the pilot trial, Spectrum developed a group-based psychoeducation session for individuals who have recently been diagnosed with BPD and have been assessed by an area mental health service in Victoria.

A psychoeducation session was run online to offer individuals an interactive way of engaging in real time with a small group of peers, allowing client participation from different locations across Victoria.

The purpose of the session was to provide participants with the latest information on BPD and an opportunity for group discussion where questions about BPD can be answered.

The session included information on the signs and symptoms of BPD and vulnerability factors that contribute to the development of the diagnosis, as well as information on evidence-based psychological treatments for BPD.

The focus of the session was to share learnings on factors that contribute to recovery, while debunking myths about BPD and learning about chronic stress, self-care practices and a lived experience story of recovery. Attendees received a series of handouts with information supporting the material discussed in the session.

The pilot trial showed attendees endorsed the groupbased psychoeducation session and found it contributed to increased knowledge about BPD, increased motivation for treatment and positively impacted the attendees’ sense of hope regarding recovery from BPD.

Close to 80% of participants attended every session suggesting that participants who attended were engaged in the content and were able to appreciate the mix of learner activity, facilitators’ input, group format and length of the session.

Overall, qualitative responses from attendees showed a need to educate individuals newly diagnosed with BPD about the recovery journey to instil a sense of hope and to highlight the efficacy of evidence-based treatment options

*Overall, qualitative responses from attendees showed a need to educate individuals newly diagnosed with BPD about the recovery journey to instil a sense of hope and to highlight the efficacy of evidence-based treatment options.*

By utilising neurodiversity-affirming practice, Spectrum recognises that some people may need additional supports outside of what we can offer to complement their therapy with us, and we can help facilitate these supports.

**Treatment**

**The connection between neurodiversity, complex trauma and personality disorder**

Neurodiversity is a term coined by Judy Singer, an Australian sociologist, to describe the experience of people living with neurological or developmental conditions including autism, dyslexia, dyspraxia and attention deficit hyperactivity disorder (ADHD), among others.

Since its introduction, neurodiversity has broadened the discussion regarding the natural variations that exist for each of us in how our brains assimilate and process information.

Take the diagnosis of autism – the experiences of people living with autism can vary immensely. In the past, there was often a focus on addressing an individual’s weaknesses. Today, the neurodiversity movement advocates for celebrating and promoting an individual’s strengths, while also considering areas in which people may need support.

We all have an innate desire to be understood and to connect with others. At times, creating and sustaining connections can be difficult for neurodivergent people – this is where the link between neurodiversity, complex trauma and personality disorder exists.

We know that neurodivergent people are at a higher risk of traumatic experiences, yet trauma can have a broader definition than single traumatic events. This community may also experience the more subtle and chronic trauma of being misunderstood or feeling they do not fit in.

For instance, if a person has a form of neurodivergency that makes it difficult to connect and communicate, they may experience profound feelings of alienation, confusion and frustration. For example, symptoms of ADHD may make it difficult for others to understand them and for them to feel understood, leading to a breakdown in communication and feelings of social isolation.

Our approach to person-focused care is centred on understanding the whole person who is seeking support. Screening for neurodiversity can have an immediate benefit to help a person and their carers understand some of the challenges they have experienced, while also informing treatment and support programs.

For example, engaging in group therapy programs may be overstimulating for a person who needs information to be delivered in a controlled setting. Likewise, reading a dialectical behaviour therapy (DBT) booklet is unlikely to be suitable for a person living with dyslexia.

By utilising neurodiversity-affirming practice, Spectrum recognises that some people may need additional supports outside of what we can offer to complement their therapy with us, and we can help facilitate these supports.

Our clinicians are skilled in understanding the complexities of each unique individual and tailoring recovery plans to promote their strengths. We have found that this level of care results in improved recovery outcomes and significant improvements in a person’s wellbeing.

**Treatment and Innovation**

**Showcasing our work at the RANZCP 2022 Congress**

Professional conferences provide a stage for showcasing the breadth and depth of Spectrum’s work. In May 2022, the Spectrum team presented at the annual Royal Australian and New Zealand College of Psychiatry (RANZCP) Congress, held in Sydney.

Conducted by the peak Australian and New Zealand psychiatry body, doctors, researchers, educators and people with lived experience shared the latest developments in the field. Spectrum had a record three symposia accepted, as well as several individual presentations.

The first symposium described the national training program where Spectrum developed and delivered a manualised core competencies training program in all states and territories across Australia. The program provides accessible and consistent education to mental health clinicians from all professional backgrounds.

The second symposium reported on two innovative interventions for supporting staff to work with clients experiencing personality disorder-related difficulties. One of the interventions was developed and trialled in Box Hill Hospital’s Emergency Department, in collaboration with emergency and mental health services and lived experience workers.

Bringing together staff across Eastern Health demonstrated the benefits of shared experience and the organisation’s commitment to optimal patient care.

The other innovative intervention was co-designed by Spectrum and the Austin Prevention and Recovery Care (PARC) service. This group-based intervention, with associated staff training and supervision, has already improved staff confidence and willingness to work collaboratively with clients who experience BPD.

The third symposium highlighted the importance of meaningfully embedding a lived experience workforce in all aspects of Spectrum’s work. We discussed the broad benefits of utilising lived experience voices in our work, as well as some of the challenges we have faced. This symposium provided a perfect opportunity for Spectrum’s new Lived Experience team to share their collective wisdom with mental health colleagues.

In total, nine Spectrum staff presented at the RANZCP Congress. This created a united presence during a period of considerable uncertainty as the field of personality disorders is reshaped in response to the International Classification of Diseases (ICD-11), which came into effect earlier this year.

*Bringing together staff across Eastern Health demonstrated the benefits of shared experience and the organisation’s commitment to optimal patient care.*

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**Treatment and Innovation**

**Launching the inaugural Spectrum Research Forum**

Spectrum’s clinical treatment and workforce training expertise is widely recognised. Now our rapidly growing research program has its own stage.

In November 2021, we launched the inaugural Spectrum Research Forum, an event focused exclusively on personality disorder research. The free all-day event was held virtually with over 250 registrations from across Australia and internationally.

The welcome address was given by Eastern Health Chief Executive Officer, David Plunkett. The Forum featured the launch of Spectrum’s Research Strategy for 2022-2026 by Eastern Health Chief Medical Officer, Associate Professor Alison Dwyer.

Two internationally renowned keynote speakers, Professor Brin Grenyer (Project Air; University of Wollongong) and Professor Suresh Sundram (Head of Psychiatry, Monash University), joined a contingent of research-active Spectrum staff and collaborative partners to fill the day with the presentation of research and program evaluation outcomes.

Professor Sundram officially launched Spectrum’s Personality Disorder and Complex Trauma Research and Innovation Centre.

Each year, Spectrum engages in a number of diverse research projects, from topics including BPD and romantic relationships, sexual diversity, supporting people with BPD in the emergency department, and understanding why so few men are diagnosed and treated for BPD. The Spectrum Research Forum offers a platform for presenting these findings to a wider audience.

One of the highlights of the Forum was when external collaborators presented research conducted in partnership with Spectrum. This demonstrated Spectrum’s holistic vision to create a more consistent understanding of how communities are impacted by personality disorder in Australia.

The feedback from Forum attendees was overwhelmingly positive, encouraging Spectrum to make it an annual event. The Forum complements the annual Spectrum Conference, a clinically focused event the team has successfully run for the past five years.

With the launch of the Forum, Spectrum’s Research team has established itself as a notable contributor on the international stage.

*One of the highlights of the Forum was when external collaborators presented research conducted in partnership with Spectrum. This demonstrated Spectrum’s holistic vision to create a more consistent understanding of how communities are impacted by personality disorder in Australia.*

**Workforce Development**

**Spectrum 2021 Conference**

In October 2021, Spectrum’s first fully virtual conference, Complexities in Personality Disorder: A Mentalization-Based Treatment (MBT) Approach, was attended by close to 200 delegates from around the world.

MBT is an empirically-supported treatment for people with BPD. It offers positive outcomes for people with complex and multifaceted presentations and comorbidities.

We were privileged to hear from a leading international expert, Professor Anthony Bateman, who developed MBT for BPD, alongside Professor Peter Fonagy. Professor Bateman delivered two keynote addresses on how MBT was conceptualised and its evolution to treating the complexities associated with borderline, antisocial and other personality disorders.

He also presented workshops on antisocial personality disorder and structured clinical management, a common factors treatment model that he developed. Both workshops were booked out.

In addition, MBT experts from across Australia showcased how the treatment has been taken up in settings across the country. Spectrum presenters included Associate Professor Sathya Rao, Dr Julian Nesci, Andrew Mottram and Rita Brown. Other speakers included Dr Celeste Benetti, Bridie Carlisle, Kalina Clarke, Michael Daubney and Dr Matt Ruggiero.

The key highlights of the conference were the stories from people with lived experience who shared how MBT had assisted them in their recovery. Delegates found these insights engaging as they offered a deeper understanding of the experiences of people living with a personality disorder.

Together with Professor Bateman, our senior MBT clinicians, Dr Julian Nesci, Andrew Mottram and Alex Potter, ran a MBT for BPD workshop for clinicians to gain in-depth training.

Attendees found the workshop useful for improving their knowledge and skills in MBT and indicated that they would apply what they learnt in their work.

Spectrum’s annual conference plays an important role in bringing together people with lived experience, researchers, clinicians and prominent experts in the field of personality disorder and complex trauma from across the world. The conference provides attendees with opportunities for professional development and to improve their skills, knowledge and build confidence in their work.

*“[The conference] inspired me to look for roles within the organisation and to think about research to implement MBT-based programs within youth justice (where I currently work).” – Conference attendee*

*“All presentations were exceptional. The lived experience of consumer and carer was extremely valuable and provided wonderful insight into what is/isn’t beneficial in treatment.” – Conference attendee*

**Workforce Development**

**Building capacity throughout Australia**

Spectrum is often asked to provide its expertise to clinicians across Australia, delivering a wide range of services across all states and territories. We offer specialist assessment, recommendations, secondary consultations, supervision and training to assist clinicians to better support their clients living with personality disorder or complex trauma.

No matter how experienced a clinician or team, it can often be difficult to take a step back to explore the interaction between the individual seeking support and the system working to support them. A fresh perspective from someone outside of the situation can provide invaluable insights that can make a difference to the client in question.

Spectrum’s consultation sessions offer a dynamic way of focusing on an accurate understanding of the client and their experiences.

Sessions include identifying therapeutic approaches to supporting the client and strategies to develop relational security, as well as facilitating critical self-reflection for clinicians to identify and understand their own reactions.

The benefit of this approach is immeasurable as it requires a clinical team to step back and reflect on how they are facilitating a safe and therapeutic space for someone living with personality disorder or complex trauma, by accounting for every part of the system that supports the person. Through this reflection, shared understandings can be explored and developed, and another approach can be taken in light of the new considerations.

At times, consultation sessions have led to an interest in further training workshops, as there is a desire to develop a team’s confidence and skills to support people living with complex presentations. At Spectrum, our goal is to improve outcomes for people living with personality disorder and complex trauma throughout Australia and we value the opportunity to support our colleagues in the field.

*“I’ve never attended a session provided by an external service that has been this relevant to my job.” – Prison officer from a Tasmanian prison service, following a recent interstate training session*

*“I have found the support provided by Spectrum to be invaluable. It has helped our broad and fragmented treatment team stay focused and has provided professional reassurance while managing difficult situations. Personally, it has increased my confidence in treating other clients with complex presentations, so the benefits have been wide ranging.” – Prison officer from a Tasmanian prison service, following a recent interstate training session*

*“I loved having a Spectrum clinician spending a day with me a week – it was very supportive.” – Personality Disorder Initiative clinician*

**Workforce Development**

**Access to effective treatment for Victorians living with a personality disorder**

Spectrum’s innovative statewide Personality Disorder Initiative (PDI) partnership is nearing its fourth year. Since its inception, the PDI partnership has improved access to effective treatments for Victorians living with a personality disorder through capacity-building, addressing stigma and increasing responsiveness within six pilot area mental health services.

Through the PDI, Spectrum has supported clinicians across the state to deliver quality training and treatment. In the past year, over 1,000 clinicians have been trained within their services and over 300 secondary consultations have been completed.

In a recent review, Dr Neil Coventry, Chief Psychiatrist for Victoria, met with clinicians from the six PDI partner health services – Alfred Health, Barwon Health, Goulburn Valley Health, Monash Health, Northern Health, and Forensicare – and their senior leadership teams.

Dr Coventry praised each of the services and acknowledged the PDI for successfully meeting its objectives. “It has been the best investment the Department has made,” Dr Coventry said.

The diverse and innovative work developed by each partner health service highlights the success of the embedded model of care. Each partner health service uniquely built a model of care that worked for the people accessing their services, and in turn acquired invaluable learning opportunities along the way.

The PDI has demonstrated that it is possible to create an adaptable model that can effectively deliver high quality treatments, secondary consultation and training to thousands of clinicians. This experience has reaffirmed that Spectrum can create vital cultural change to better serve Victorians living with a personality disorder.

* 54 training events on understanding and working with people affected by personality disorder
* 1,149 staff trained by personality disorder specialists
* 312 secondary consultations provided to clinicians
* 31 clients received specialist individual psychotherapy
* 21 staff received individual supervision by personality disorder specialists
* 58 clients received specialist group psychotherapy
* 73 staff received group supervision by personality disorder specialists

*“[I really valued] the group education sessions and ability to discuss complex clients with a highly skilled group of clinicians.” – Personality Disorder Initiative clinician*

**Workforce Development**

**Project ECHO: Supporting healthcare professionals to help others**

*The need for Project ECHO was made evident by the overwhelming response Spectrum received in the first few days of promotion, reaching over 350 registrations.*

In 2022, Spectrum launched the Online Personality Disorder and Complex Trauma ECHO (Extension for Community Healthcare Outcomes) in collaboration with Goulburn Valley Health to cultivate a community of practice for Victorian health professionals working with people with personality disorder and complex trauma.

Project ECHO uses a hub and spoke model of didactic and case-based learning. Delivered fortnightly, each session includes a short presentation from a Spectrum clinician or affiliated expert on a particular topic, followed by an in-depth case consultation. There are opportunities for participants to ask questions and provide recommendations on the case study.

The ultimate goal of Project ECHO is to establish a community of practice, comprising of healthcare professionals with a range of expertise, to improve the wellbeing of people living with personality disorder and complex trauma. The need for Project ECHO was made evident by the overwhelming response Spectrum received in the first few days of promotion, reaching over 350 registrations.

Project ECHO focuses on complex presentations, which require guided practice and ongoing mentoring, particularly in areas where other forms of training or capacity building fall short.

The curriculum covers a range of topics, from the difference between CPTSD and BPD or the importance of validation as a therapeutic tool, in an effort to assist in the treatment and recovery of people living with personality disorder and complex trauma.

Spectrum will continue to empower health professionals to better support people with living with personality disorder and complex trauma through psychotherapeutic treatment principles. Project ECHO sessions are open to any healthcare professional in the private or public sector in Victoria.

**Workforce Development**

**Staff profile: An interview with Kat Kahler**

Kat Kahler is a Senior Clinician and Trainer at Spectrum. She is an integral part of Spectrum’s Workforce Development and Complex Care Clinical teams, providing training to empower clinicians to provide evidence-based and holistic treatments for their clients.

Born in Germany, Kat studied mental health nursing in Ireland, offering her the flexibility to travel and work. In 2009, Kat moved to Australia after spending a year in India and Nepal.

Kat joined Spectrum in 2019 on a part time basis while also working as an Enhanced Crisis Assessment Team (ECAT) clinician in an emergency department in Melbourne.

She finds it satisfying to embody her values of kindness, compassion and being useful in every aspect of her work.

**Kat’s journey at Spectrum**

I am able to remain quite calm and emotionally balanced and not take things personally, which is essential when working in mental health. To understand people's suffering, I have engaged in a lot of reflection, supervision, further study and meditation. I find that kindness is an essential aspect of providing support.

**The value of providing evidence-based care**

It is really rewarding when you can see that a person living with BPD, through validation, acceptance and curiosity, can develop a trusting therapeutic relationship and can start to implement helpful strategies in their daily life. This can be inspiring.

**The lasting impact of workforce development**

I enjoy providing therapy to clients, however, I also enjoy empowering other clinicians to feel confident in their work and to find a way to come to a helpful shared understanding of clients’ difficulties through collaboration. I like providing supervision, secondary consults and training because it allows me to model and propose therapeutic principles to clinicians.

When people attend training sessions, they bring their own knowledge and experience. Often the training allows people to confirm what they already know, and provides them with the confidence to trust themselves and their experiences, while also understanding the value of external reflection through supervision and training.

**The importance of Spectrum’s workshops**

My favourite workshops are Working with people with BPD in crisis and Foundational knowledge because they were designed in a way that incorporates people's existing experiences and knowledge.

These workshops allow people the space and time to reflect on their own experiences and share these with other people from a variety of roles and backgrounds. The more interactive and collaborative the workshops, the more helpful they are.

*“It is really rewarding when you can see that somebody living with BPD, through validation and curiosity, can develop a healthy therapeutic relationship and can start to implement strategies themselves in their daily life. This can be really inspiring.”*

**Workforce Development**

**Developing sustainable community dialectical behaviour therapy**

*The project aims to create a community delivering evidence-based specialist treatment that is accessible to those that need, both in location and cost, ensuring the transference of DBT skills to more clients.*

Spectrum is launching a dialectical behaviour therapy (DBT) development initiative in four rural area mental health and wellbeing services.

The partnership with local adult mental health and wellbeing services (AMHWBS) sees Spectrum’s Workforce Development team train clinicians while adhering to the principles of DBT to form a sustainable and workable model of care, which is unique to each service.

The initiative is a response to an unmet need identified in rural health services regarding access to evidence-based treatment for personality disorder and complex trauma. In the past, the capacity of rural health services to provide services to people living with BPD has been limited due their location, size, transient nature of staff and models of care.

Similarly, many clinicians at Spectrum have been part of viable, effective initiatives that fall over after passionate clinicians leave the organisation or one-off funding or pilots are completed.

Spectrum has a long tradition of supporting therapeutic practice development in mental health practitioners throughout Victoria. Following the success of Spectrum’s Personality Disorder Initiative (PDI) and National Training Strategy (NTS), Spectrum’s Workforce Development team was eager to employ a systemic and holistic approach to service development. This work continues in this project by establishing local, sustainable DBT programs in AMHWBS.

Running our own comprehensive DBT training programs gives Spectrum an unmediated insight into the provision of DBT in Victoria. As a result, we know many clinicians are offering DBT-informed practice without the foundational knowledge, principles and framework of the therapy, leading to less efficacious outcomes and clinician burnout.

This project came about organically when several AMHWB services contacted our Workforce Development team with similar requests for support. Our data demonstrated that many services had tried to establish evidence-based specialist treatments for personality disorder in the past. However, the challenge of setting up programs with limited resources in rural and remote areas of Australia often meant that they were unable to commence or maintain service provision.

In response, we built a service development model that includes training, planning and strategy, as well as supervision and support to implement and maintain the treatment programs. We now have four rural AMHWBS services who have committed to the project for the next 12 months and a team of passionate clinicians dedicated to do the work.

The project is overseen by a steering committee with leaders and clinicians from all services to share ideas and support one another. The project aims to create a community delivering evidence-based specialist treatment that is accessible to those that need, both in location and cost, ensuring the transference of DBT skills to more clients.

**Key partnerships**

**Organisations that Spectrum has been fortunate to work with throughout 2021-22**

* ACT Health
* Alfred Health
* Austin Health
* Australian BPD Foundation
* Australian Catholic University
* Barwon Health
* BPD Co, South Australia
* Centre of Excellence for Eating Disorders (CEED)
* Centre for Mental Health Learning (CMHL)
* Coroners Court of Victoria
* Deakin University
* Department of Health and Human Services
* Eastern Health Foundation
* Forensicare
* Forensic Mental Health Service, ACT
* Goulburn Valley Health
* HYPE (Orygen)
* Melbourne University
* Mind
* Monash Health
* Monash University
* Northern Health
* Partners in Recovery Care (PARC)
* Project Air PD Initiative NSW
* RMIT University
* SANE Australia
* South East Melbourne Primary Health Network
* St George’s Hospital
* Swinburne University
* Tandem Carer Organisation — VIC
* Tasmania Statewide Mental Health Services
* Top End Mental Health Services at Northern Territory
* Victorian Data Linkage Service

**Spectrum**

**Annual Report 2021-22**

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