



E-Newsletter December 2011

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The peak body representing the community mental health sector in Tasmania at a state and national level



The MHCT staff would like to wish you all the best of the season and peace and prosperity in the new year

..... may the holidays refresh your spirit and bring you new inspiration and happiness.

The MHCT Office will be closed from 5pm Friday 23 December 2011 until 9am Tuesday 3 January 2012

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MHCT News

Update from the CEO

Season's Greetings All

I've been on board with the Mental Health Council of Tasmania for nearly six weeks now and feel like I am starting to get a better understanding of the community mental health sector. There are many challenges being faced by our members and the mental health sector will see significant change in coming years. For some this will create opportunity and excitement. For many change creates anxiety, and for everybody there is uncertainty about exactly what the mental health landscape will look like in coming years.

As well as continuing to advocate on behalf of our members, MHCT is looking to create opportunities for members to provide direct input into the mental health reform agenda. In 2012 we will be facilitating a visit by the national peak body, Mental Health Council of Australia, to come and meet with members (both ours and theirs) and encourage as many of you to attend as possible so that the community mental health voice is well and truly heard. Details are yet to be finalised but late February looks a likely timeframe with forums in both Launceston and Hobart. We'll send a date saver as soon as we know. Later in the year we will be hosting the new Mental Health Commission and similarly will make sure members have opportunity to provide direct input into their work.

This week's elevation of both the Hon Mark Butler and his mental health portfolio into cabinet are a good sign of the continued prominence of mental health on the federal governments' agenda. It is also pleasing to see that Minister Butler's portfolio includes social inclusion and ageing, so along with other mental health organisations, we will continue to encourage our federal politicians to have a holistic view of mental health based on social rather than medical models of what causes good or bad health outcomes.

I recently attended a lecture given by Patrick McGorry, hosted by Amnesty International, about the impact of Australia's mandatory detention regime for asylum seekers. Numerous studies show a dose-response relationship between the duration of immigration detention and both the likelihood and severity of detainees' mental illness. Professor McGorry likened making mandatory, indefinite detention humane as akin to trying to treat malaria in a swamp – something no sensible or humane government would dream of doing. With Tasmania now having its own "mental illness factory", advocacy on behalf of this extremely disadvantaged group will be part of MHCT's advocacy platform in 2012.

Along with other community sector organisations, we met with Statewide and Mental Health Services last week to discuss issues raised by our members at our regional mental health forums.

The MHCT is currently preparing a bid for the ****Productivity Places Program Plus (PPP+)** training subsidies. For the first time, the MHCT will be formulating an industry-wide bid on behalf of the community mental health sector in conjunction with a number of RTOs. This collective endeavor should maximise our ability to attract funds. ****Further details of the opportunities and process are outlined in the article below.**

Over the past few weeks I have been visiting many of our members. I have found your enthusiasm for the work you do and the people you work with, as well as your optimism about the future for your own services, very uplifting. I look forward to getting around to see more of you in January. Feel free to contact me to arrange a visit so I can learn more about your service and hear how MHCT can support you in your work.

Finally, have a Merry Christmas and a safe New Year.

Darren Carr

The Mental Health Council of Tasmania Committee Representation Update

Statewide and Mental Health Services

Committee	Key Points
Mental Health Act Review Advisory Committee	The Committee continues to meet fortnightly to discuss the 71 submissions received. The Committee makes recommendations for legislative amendments to the Drafting Committee, who then considers the recommendations.
Recovery Advisory Group	New group has been established as an 'off-shoot' of the CSO/SMHS Interface Meeting, driven by Susan Crave and the MHCT Michelle Swallow and Jesse Shipway represented the MHCT at the initial meeting.
Consultation Campbell Street	SMHS Southern Area Management Unit recently held a consultation process with key stakeholders to discuss potential new models in response to budget measures A paper is available for comment – chris.fox@dhhs.tas.gov.au
SMHS Consumer and Carer Participation Review Implementation Advisory Committee	The committee has failed to meet since September. As such, further delays on implementation expected. It is probable that the Group will be restructured upon reconvening in February next year. The MHCT will keep members updated.
CSO/SMHS Interface Group	The recent meeting focused on reviewing the terms of reference, with an agreement to refocus on the strategic nature of the meeting. It was agreed to increase membership to include Commonwealth departments.

Regional Mental Health Groups

Committee	Key Points
Northern RMHG Meeting	Next meeting scheduled for February 2012 . Date, time and venue will be confirmed in January 2012 E-News.
North West RMHG Meeting	Next meeting scheduled for February 2012 . Date, time and venue will be confirmed in January 2012 E-News.
Southern RMHG Meeting	Kris McCracken, MHCT Workforce Development Officer was guest speaker. Kris gave an update on Workforce Development for the community mental health sector. Attendees discussed continuing issues for consumers accessing community services through the MRP process. Next meeting scheduled for February 2012 . Date, time and venue will be confirmed in January 2012 E-News.

Others

Committee	Key Points
Northern Mental Health & Housing Forum	Question rose about Housing Tasmania (HT) process when HT tenants are being harassed by neighbours. HT was an apology at meeting, thus will be carried over to next meeting. Youth Futures have funding for 12 micro dwellings (The Castle). They are looking at how they can roll these out. Thyne House (30 bed Youth Supported Accommodation) officially opened on 26/11/11. Partnership between Commonwealth Govt (funder), Community Housing (tenancy) & Anglicare Tasmania (support services). Issue rose about people being discharged from hospital to homelessness. Process for early referral to Access Accommodation discussed. Next meeting Wednesday 15 February 2012, 11:30am – 1pm, Training Room Anglicare, 116 Elizabeth Street, Launceston. Contact Brett Williams B.Williams@anglicare-tas.org.au or 6326 1720 .
MHCT Community Mental Health Industry Workforce Development Advisory Group	The MHCT Industry Advisory Group met for a second time on December 6 to continue progressing workforce development activities in the Tasmanian community mental health sector. Items discussed included the upcoming MHCT PPP+ funding bid on behalf of members, potential topics for MHCT-convened Employer Support seminar series to be offered in 2012, and potential skills and training opportunities for 2012.

In order for the MHCT to provide accurate representation at these committees and working groups, we look forward to continued input from our members.

****The Productivity Places Program (PPP+)**

PPP+ is a joint initiative between the Commonwealth and State Governments (through Skills Tasmania) that heavily subsidises the cost of training to employers.

What is the MHCT doing?

The MHCT is currently preparing a PPP+ bid on behalf of the community mental health sector in conjunction with our Industry Advisory Group. Skills Tasmania is increasingly encouraging joint bids by industry associations that address specific skills needs and shortages, and that such bids will be prioritised.

Who is eligible?

Anybody who – in the week of applying – has worked for an MHCT member organisation for at least one hour or more for pay, profit, commission or payment in kind for is eligible for the PPP+ subsidy.

The MHCT must establish a demonstrable need for skills training. This training can be related to any aspect of the organisation's business, including administrative duties.

How much will the training cost?

The cost of the training depends on the cost of the qualification and the number of full time equivalent (FTE) staff employed by the entire organisation. Currently the percentages of payment are based on the following:

1–19 FTE employees = 10% contribution;

20–199 FTE employees = 20% contribution; and,

200+ FTE employees = 30% contribution.

Typically, the employer contribution ranges from \$500 to \$1,500 per qualification, or \$45 to \$250 for skill sets.

Can I apply for both qualifications and skill sets?

Yes. If the needs are appropriate, the MHCT will support applications for skill set funding under PPP+ where strong demand exists within a region to enable viable group sizes to be secured.

How much time do participants need to study and attend workshops?

Each qualification varies in delivery. Typically, there will be a combination of workshops delivered at a Skills Institute campus, self-paced resources and project work completed in your own time and assessments. Generally, workshops run through the day and for 4 to 8 hours. Support from your employer is essential in terms of work scheduling and often there is direct involvement of supervisors in workplace learning. Employees and employers must understand the commitment required to undertake the training.

What should I do now?

Individuals should first discuss their needs with their supervisor/ employer. Completed forms should be returned to wfd@mhct.org or fax **6224 8497**. People can also complete their application online at <https://www.surveymonkey.com/s/MHCTSIPPP>. The MHCT will then compile the industry bid and notify individuals and employers if successful.

If you have specific questions related to courses, please contact the Skills Institute on **1300 362 175**. If you have a question about the MHCT industry bid, please contact Kris on **6224 9222** or wfd@mhct.org.

MHCT Leadership and Management PPP+ bid

The MHCT is delighted to be able to invite members to consider taking part in an innovative and valuable **leadership and management training** opportunity for the community mental health sector.

What is the MHCT doing?

The MHCT is currently preparing a PPP+ bid in conjunction with Singleton Consulting & Training and our Industry Advisory Group on behalf of the community mental health sector. Skills Tasmania is increasingly encouraging joint bids by industry associations that address specific skills needs and shortages, and that such bids will be prioritised.

Who are Singleton Consulting & Training?

Singleton Consulting & Training specialise in strategic human resource management, workforce planning and organisational development. They are a Tasmanian owned and operated RTO with a focus on delivering leadership and human resource management qualifications.

What is on offer?

The MHCT will make a joint PPP+ bid with Singleton Consulting & Training to focus on leadership and management training and offer two qualifications to our members:

- **Advanced Diploma of Management**

This will be appropriate for senior management within an organisation or those who have completed the Diploma of Management. The cost of the Advanced Diploma will be a total of \$5,000 per participant, but with the PPP+ subsidy the employer contribution will be \$500 for small employers (under 19 FTEs); \$1,000 for medium employers (20–199 FTEs); and \$1,500 for large employers (200+ FTEs).

- **Diploma of Management**

This is appropriate for anyone who has worked in a management role for at least a year (e.g. team leader upwards). The total cost for this will be \$3,500 per participant. The subsidy will bring employer costs down to \$350 for small employers; \$700 for medium employers; and \$1,050 for large employers.

Who is eligible?

Anybody who is working for an MHCT member organisation in some kind of leadership and management capacity is eligible to join this bid for the PPP+ subsidised training.

As the MHCT must establish a demonstrable need for skills training – as well as facilitate the best possible training – we are conducting a basic training needs analysis for interested members to complete.

Workforce Planning Workshop

In conjunction with the training itself, a half-day workshop will be convened in February aid in workforce planning in the mental health sector. This workshop will help influence the shape and content of both qualifications.

The MHCT requests that the most appropriate person from participating organisations in the PPP+ bid to attend. Individuals whose job role encompasses Human Resources and/ or training management are likely to be the most suitable attendee. The decision as to who should attend should be discussed with the most senior manager of an organisation.

Engaging in this workforce-planning workshop will be crucial in ensuring that MHCT-brokered training truly reflects the needs of employers. It is also a very strong indication to Skills Tasmania that we as a sector are approaching workforce development in a systematic and rigorous way.

How much time will participants need to dedicate to study and attend training?

Each qualification varies somewhat in delivery. There will be a combination of delivery offered in Hobart and Launceston, and teaching will be predominantly workshop based. Once we have an idea of numbers and individuals, the MHCT will work with Singleton Consulting & Training to best shape course delivery to the needs of students.

Support from employers is essential in terms of work scheduling and there may be some direct involvement of supervisors in workplace learning. Employees and employers must understand the commitment required to undertake the training.

What should I do now?

Individuals should first discuss their needs with their supervisor/ employer. You should then fill out the electronic form found at <https://www.surveymonkey.com/s/MHCTPPP2>.

If you have specific questions related to either of the qualifications, please contact Kirsten Singleton on **0418 990 315**.

If you have a question about the MHCT PPP+ bid itself, please contact Kris on **6224 9222** or wfd@mhct.org.

The MHCT will continue to liaise with members to best formulate our applications for PPP+ funding for the community mental health industry and access support for your training needs.

The period for EoI submissions will remain open until C.O.B. Friday, 24 December 2011.

The MHCT will notify you of the result of our application as soon as we are able.

Sector News

Rural Health Week Awards

Congratulations to Rural Alive & Well

Rural Health Worker Award
Wayne Turale

Group Award
The RAW Team



Appointment of Mental Health Commissioners

The Minister for Mental Health, Mark Butler, has appointed a diverse and expert group of Commissioners to guide the new national Mental Health Commission and steer the new Road Map to reform over the coming years.

The new Mental Health Commission gathers mental health consumers and carers, professionals, advocates and community-based experts. The broad experience and expertise of this group means they can start their important work quickly.

<http://www.health.gov.au/internet/ministers/publishing.nsf/Content/mr-yr11-mb-mb223.htm>

Consumer and Carer Experiences of Stigma from Mental Health Professionals

A study by the MHCA, *Consumer and Carer Experiences of Stigma from Mental Health and Other Health Professionals*, has revealed that the levels of stigma experienced by mental health consumers seeking treatment from mental health and other health professionals are similar to the levels of stigma reported in the general population.

A downloadable copy of this report can be found at <http://www.mhct.org/news.html>

Mental Health Carers Survey 2011-12

Following the MHCA reports *Adversity to Advocacy*, the lives and hopes of mental health carers in 2009 and the *Mental Health Carers Report 2010*, the MHCA is seeking your input to provide a true picture of the current situation facing mental health carers in the Australia of 2011.

With your input the Mental Health Council of Australia can provide a clear picture of the issues affecting mental health carers over the last 12 months.

Have your say, go to:

<http://www.surveygizmo.com/s3/569049/Mental-Health-Carers-Survey-2011-12>

or the MHCA website open for your input from now until Christmas Day <http://www.mhca.org.au/>

The results will be published in the *Mental Health Carers Report 2011-12*.

If you would prefer to complete a paper survey please contact Carolyn.Conaghan@MHCA.org.au or telephone: 02 6285 3100

Comorbidity Training Needs Survey

The Alcohol, Tobacco and other Drugs Council is conducting a survey to assess the training needs of the broader non-government and government organisations working with people with co-existing mental health and alcohol and drug issues. The information gathered from the survey will then be used to inform the development of a cross sector training package for workers in this area. The survey takes approximately 10 minutes and is completely confidential.

<http://atdc.org.au/2011/12/comorbidity-training-needs-survey/>

If you have any questions regarding the survey please contact
Amanda Street 6224 7780 amandas@atdc.org.au

Private Mental Health Consumer Carer Network

The Private Mental Health Consumer Carer Network was formed in 2002 to promote the interests of members of the community requiring private mental health services, and it provides a strong voice for people with a mental health problem or mental illness, their families and the community. The network is an integral part of key policy and decision making processes affecting many Australians, and it advocates for improved private mental health services.

Joining the Network is free, and as members you will have an effective organisation that can confidently speak out to address issues and concerns on your behalf; email access to information on mental health matters; e-mail newsletters and e-news alerts; and the opportunity to be part of the newly forming Network's Tasmanian committee.

The newly forming Tasmanian committee will meet for the first time on 19 January, 2012, from 2-5 pm at the first floor meeting room in the McDougall Building (Off Ellerslie Rd in Battery Point, limited street parking available).

Each consumer and carer who become members of the Tasmanian committee will receive a sitting fee of \$25 per meeting, and the Tasmanian committee meetings are held twice a year.

lucy.henry@bigpond.com

0438 973 333

or find out more information at the website: www.pmhccn.com.au

November, 2011

Understanding mental illness through better research

Mental health research in Australia is being boosted by the Gillard Labor Government with \$26.2 million to go towards research into better mental health treatment and improved clinical outcomes.

On 23 November 2011 Minister for Mental Health and Ageing, Mark Butler, announced how the Government's Budget commitment to strengthen Australia's strategic research capacity would be allocated and implemented by the National Health and Medical Research Council (NHMRC).

In summary, the NMHRC will;

- Issue a Targeted Call for Research for up to \$13 million into the prevention of, and early intervention in, mental illness in children and young people.
- Allocate up to \$5 million for Centres of Research Excellence, focusing on mental health research in a collaborative team-based environment, which emphasizes research translation and training clinical researchers to be future research leaders.
- Allocate up to \$8 million in new NHMRC Fellowships to support leadership in the field of mental health research.

Events

TheMHS

Summer Forum

23-24 February 2012

Sydney

This Forum provides opportunities to learn about mental health hot topics. The Forum format encourages discussion and questions. Delegate numbers are limited to 200.

Topic: Confronting Self Harm: from understanding to responding.

For further details follow the link <http://www.themhs.org/summer-forum>

ATDC 2012 "Challenging Conversations: Creating an inclusive system"

15 – 16 May 2012

Hotel Grand Chancellor Hobart

The Alcohol, Tobacco and other Drugs Council (ATDC) Tas Inc is pleased to announce ATDC 2012 Challenging Conversations: Creating an inclusive system, to be held in Hobart on 15 & 16 May, 2012.

The conversation is an exciting opportunity for those working in the Alcohol, Tobacco and other Drugs (ATOD) and related sectors to engage in conversations that challenge the way we think about our industry and provide our services.

The conference will address challenges and opportunities in the following areas:

- Providing clinical and community care
- Creating effective collaborative networks
- Expanding workforce development
- Managing sustainable organizations
- Embedding consumer choice as a tenet of policy and program development

Presenters will share their expertise through plenary, interactive and participatory presentations and attendees will have an opportunity to contribute to the debate of how to create an inclusive and effective alcohol and other drug service system.

This conference will be of value to attendees from community, public and private settings so we invite you to join us for some challenging and rewarding conversations.

For further information contact Christine at conference@atdc.org.au

Building Healthy Minds Conference

13 – 15 July 2012

Brisbane



For all the details.....

<http://www.brainandlearning.com.au>

TheMHS Conference 2012

21 - 24 August

Cairns, Queensland, Australia

Recovering Citizenship

Keynote Speakers:

Mick Gooda - Aboriginal and Torres Strait Islander Social Justice Commissioner. He is a descendent of the Gangulu people of central Queensland.

Roberto Mezzina - Consultant Psychiatrist, Trieste Mental Health Dept; WHO Collaborating Centre on Training and Research

Rufus May - Clinical Psychologist, Bradford District Care Trust's assertive outreach team and Honorary Research Fellow University of Bradford.

<http://www.themhs.org/2012-annual-conference>

Social Psychling

Join Tasmania's first cycling group for people recovering from mental illness. Get on board the cycling craze and give yourself a natural lift. Rides leave Hobart's Domain each Sunday at 10.30am and head out along the Inner-City Cycleway before stopping for a coffee. The round-trip takes about an hour, the pace is leisurely and all you need is a helmet and a 'roadworthy bike'.

To register (it's free) call 0487 698 868 or email socialpsychling@gmail.com

Workshops & Training

Mental Health in the Workplace

3 February 2012

Hobart

Partnering Healthy@Work is presenting a unique opportunity for practitioners, researchers, students and interested individuals to learn from our leading thinkers and contribute to the cutting edge of knowledge in the field of mental health in the workplace.

The Workshop will be held from 9am-5pm on Friday 3 February 2012 and discussions will focus on why good employee mental health is an essential contributor to the business bottom line? Why do we need to tackle this issue right now? How can we develop successful strategies to build mental health within current workforces and future organisations? And, what does the future hold?

<http://www.menzies.utas.edu.au/article.php?Doo=Redirect&id=1303>

For more information contact

Doreen Bate

Menzies Research Institute

Doreen.Bate@utas.edu.au.

Trauma-focussed Therapy - Working with Children and Adolescents

19 & 20 April 2012

Launceston

The Australian Centre for Posttraumatic Mental Health at the University of Melbourne is an internationally recognised leader in the field of posttraumatic mental health, and our trainers are expert trauma clinicians. This interactive and skills-based workshop is for experienced practitioners working with children and adolescents. Participants will have the opportunity to learn about and practice core skills involved in providing effective interventions for posttraumatic mental health problems arising from single and repeated trauma and disaster. The training experience is enhanced by the use of video clips of expert demonstrations. A comprehensive package of practitioner tools and client handouts is provided. The training is APS endorsed and meets requirements for 'active' CPD points.

Workshop facilitators: Dr Vanessa Cobham and Assoc Professor Brett McDermott (Mater CYMHS QLD).

For further information

<http://www.acpmh.unimelb.edu.au/services/workshops.html>

Resources

Tasmanian Comorbidity Framework 2011.

Statewide and Mental Health Services have released the Tasmanian Comorbidity Framework 2011.

The Framework is not intended to be used as an action strategy, with goals and timeframes, but rather to provide guidance to any current and future projects/activities in relation to comorbidity.

The following principles have been adopted in the Framework to guide service planning, development and provision for clients living with comorbidity:

- Promotion, prevention and early intervention
- Client and family involvement
- A duty of care to all clients regardless of where they present
- Consistent assessment and management
- A highly skilled, capable and sustainable multi-disciplinary workforce, and
- Consultation, collaboration and networking between service providers.

Research reveals the daily struggle with psychotic illness

A comprehensive study of thousands of people living with psychotic illness provides compelling evidence of the need to provide more support and better-coordinated community mental health services in Australia.

The *People Living with Psychotic Illness 2010* study, the largest of its kind ever undertaken in Australia, found that **psychotic illness affects around one in every 200 Australians every year** and that 90% of people affected report a deterioration in their ability to function in their daily life – be it cooking, cleaning, managing their finances or working.

Focusing on clients of public mental health services, the study found that, despite being in treatment, four out of ten of the 64,000 adult Australians with a psychotic illness continue to experience delusions and a third currently experience hallucinations.

This report provides some encouraging news with more people now experiencing periods of good recovery and hospital admissions for mental health reasons and involuntary admissions have both decreased by one third.

The *People Living with Psychotic Illness 2010* study found:

- People with psychotic illness are more likely to be male, to be living alone and to have low educational qualifications;
- The most common psychotic illness is schizophrenia (47%);
- Two in three (69.3%) people said their illness made it difficult to maintain close relationships;
- Government pensions are the main source of income for 85% of people living with a psychotic illness;
- People living with a psychotic illness see their GP nine times a year on average – almost twice as often as the general population – and have much higher rates of chronic illness such as diabetes and cardio-vascular disease;
- Two in three (66.1%) people with psychosis smoke tobacco – on average 21 cigarettes a day – as compared with only one in four (25%) in the general population;
- People living with a psychotic illness are rarely physically active and often have a poor diet;
- Abuse of alcohol is far higher than the general population with more than half (58.3%) the males and four out of ten (38.9%) females stating they have abused alcohol at some time.

MHCT Resource Library

The Mental Health Council of Tasmania has a comprehensive selection of, Self Help resources and Professional Practice resources in the MHCT library. Resources may be borrowed by simply:

- Filling in a Borrower Form
- Showing your ID (that includes your address)
- Limit of 3 resources borrowed at a time & loans must be returned within 6 weeks

Member Profile



History and Purpose

Eureka Clubhouse Incorporated officially opened its doors on the 27th of February 1995. In 2006 Eureka amalgamated with Colony 47. We did this in order to be able to provide a stronger service to members with more opportunities.

Eureka is based on the Clubhouse Model (a community based model), which originated in the United States during the late 1940s.

The model was designed to be used for those people within our society who suffer or have suffered with a mental illness. The basis of the model is a work-focused day, which engages members and staff together, side-by-side, in the running of the clubhouse. The work we do has real purpose, value, and mirrors the workplace in the general community.

With the support of staff and existing members, the individual has the opportunity to regain confidence, self-esteem, a work ethic, and assimilation into the wider community, which is sometimes lost during periods of illness. Duties include: working in administration, commercial style kitchen duties, house maintenance, planning/decision making and external training and work programs.

Our aim is to provide an environment that is conducive to the reintegration of the individual into the wider community and the world of work. Once an individual becomes a member of a Clubhouse, membership is for life; therefore, the support from staff and members is ongoing even when a member has entered the workforce outside of Clubhouse.

Our mission statement

"Eureka Clubhouse is a place where people who experience mental health can belong, be needed and find the help and support they deserve. Eureka Clubhouse offers respect, hope, and opportunity to access worlds of friendship, housing, education, and employment.

Our vision is that all people who experience mental health achieve their potential, are respected as co-workers, neighbours and friends, and be contributing and valued members of society."

Transitional Employment

Recently Clubhouse was successful in obtaining additional funding for a Transitional Employment (TE) program. Transitional Employment acts as a gateway for people who, for various reasons, struggle to find a job independently. A member who is selected for a TE placement would obtain a part-time entry level position based and located in a local business and their tenure would be 6 to 9 months in duration for 10 -20 hours per week.

Staff

Clubhouse has a staff of five comprising of FTE 4.0. These roles are divided between Clubhouse generalist, housing and TE.

Activities

Amongst the myriad of activities is compliance with the International Centre For Clubhouse Development Standards (www.iccd.org), low cost meals, Member surveys, public information sessions, 100% member participation in the running of the program and integrating with other Mental Health services and the community.

Eureka Clubhouse is funded by DHHS Mental Health Services.

Do you have something **you would like to contribute?**

Just email your article (no more than 500 words please) and maybe a picture or two!!

admin@mhct.org



If you do not wish to be on the mailing list for our e-news – just call 6224 9222 or email admin@mhct.org