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Ella Haddad
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Department of Health and Human Services
4-22 Elizabeth Street
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9 December 2015

Dear Ms Haddad

On behalf of the staff and board it is my distinct pleasure to present to you the Budget Submission from the Mental Health Council of Tasmania for 2016-2017.

This submission comes at a time of significant change and reform for the mental health sector at both a state and national level. As the peak representative body for the mental health sector, we acknowledge the need to also shift our goals in preparation for these reforms and to be ready for what lies ahead.

For this particular Budget Submission we wanted to specifically reflect the reform directions of the Rethink Mental Health 10 year Plan for Mental Health in Tasmania. It is our hope that the projects within this submission will ensure that the Mental Health Council can assist with the implementation of the plan by working with the mental health sector to achieve the objectives that will directly improve the mental health of all Tasmanians.

We look forward to hearing your response to the submission and working in conjunction with the Mental Health Alcohol and Drug Directorate in 2016 and beyond.

Warm regards,

A handwritten signature in black ink, appearing to read "Connie Digolis".

Connie Digolis
Chief Executive Officer



Submission

Tasmanian Government 2016-17 State Budget

December 2015

Authorised by:

Connie Digolis
Chief Executive Officer

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Overview

The Mental Health Council of Tasmania (MHCT) is the peak body representing the interests of the community managed mental health sector, providing a public voice for people affected by mental illness and their carers and the organisations in the community sector that work with them. MHCT advocates for effective public policy on mental health for the benefit of the Tasmanian community as a whole and has a strong commitment to participating in processes that contribute to the effective provision of mental health services in Tasmania.

As the peak body for mental health in Tasmania, MHCT is accountable to its members and the Tasmanian community to ensure its focus is on creating a:

Mentally healthy Tasmania

We want to encourage the benefits of mental health promotion, prevention and early intervention and ensure every opportunity is provided to all Tasmanians to nurture their mental health and wellbeing.

Community free of stigma and discrimination

We strive toward a society where mental illness is free from stigma and prejudice. We believe diversity should be celebrated and supported in our community and mental health services should acknowledge the needs of vulnerable groups.

Coordinated and integrated mental health system

MHCT is focussed on working with all stakeholders to reform the mental health system so it is coordinated, integrated and person-centred at every stage of life.

Mental health sector where services and supports are shaped by the individual

Individuals should be empowered to work alongside service providers to build their capacity. We want to see a Tasmania where consumer and carer participation is integral to ensuring all services are meeting the needs of the community.

Strong and sustainable workforce in the community

Community mental health services who work with those living with mental health issues should be well-supported, well-trained and adequately resourced to do their work.

The guiding principles outlined above inform our work and are at the basis of our submission to the next Budget round. We have been privileged to partner with the Mental Health Alcohol and Drug Directorate (MHADD) in the Rethink Mental Health project which has delivered a 10 Year Plan for Mental Health in Tasmania. We have taken as our starting point for this submission some of the actions listed in the plan as important to the delivery of a coordinated and integrated mental health system and the improved mental health and wellbeing of all Tasmanians.

Submission in Brief

1. To actively engage and support consumers and carers in service planning, delivery, evaluation and quality assurance activities by implementing an NGO version of 'Your Experience of Service' (YES) - Australia's National Mental Health Consumer Experience of Service Survey Instrument. This will review and evaluate all NGO services in relation to outcomes for consumers, identified needs and service gaps, with findings being used to support continuous service improvement. The YES survey is designed to meet the high level of interest in the mental health sector in using a nationally, comparable experience of care measure.

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Conducting the survey in parallel with the Department's clinical services YES survey (which is an action in the 10 Year Mental Health Plan) will provide comparable data across both sectors.

2. The coordination and facilitation by MHCT of three-yearly consumer and carer consultations along the lines of the Rethink consultations as part of the 'monitoring and reporting processes for implementation of the 10 year plan.'
3. Increasing the mental health literacy of Tasmanians by equipping them with the knowledge and skills to maintain their own mental health and wellbeing; build tolerance and understanding towards mental illness; and recognise the signs and interventions available to support suicide prevention. This will be achieved by targeting schools, workplaces and community networks to adopt an approved, standardised approach towards implementing mental health promotion and education.

MHCT is well placed to work with the Department on the NGO YES survey and consumer and carer triennial consultations. MHCT already has in place activities and networks to facilitate this work and these include our Mental Health Leaders network, our Regional Mental Health Group networks and continued work in partnership with relevant consumer and carer organisations (for example, Carers Tasmania, Flourish and Mental Health Carers Tasmania). This will allow much of the networking and engagement activity around the 10 year plan consultations in particular, to be provided through in-kind support from our organisation.

For quite some time now the promotion and increasing of mental health literacy and a subsequent decrease in stigma in our community has been an issue of great importance to MHCT. We believe that this is a critical underlying prerequisite to an improved mental health system and better mental health outcomes for all Tasmanians.

We acknowledge that a number of schools and workplaces have recognised the need to do something to address this, the result being a haphazard range of initiatives that are well-intentioned, but not delivered or evaluated with any level of consistency. Also of note, is the broad range of programs, information, resources and services available to address these issues, making choosing the right program a daunting prospect for those not working in the mental health sector.

For these reasons we are requesting funding for the delivery of a project which will guide and support schools and workplaces to confidently deliver mental health promotion and education. By working closely with stakeholders and member organisations, this project will establish the guidance and linkages to programs and services that will allow schools, workplaces and communities to proactively raise mental health awareness, decrease stigma and tackle suicide prevention responsibly, consistently and confidently. Adopting this approach will ensure initiatives are evidence based, that measures of success can be recognised and replicated and that the bridge between the mental health sector and Tasmanian communities is largely diminished.

We believe that the projects we have presented for approval will assist in ensuring an enhanced, more inclusive and sustainable community mental health sector; a sector that works in partnership with Government to provide increased mental health literacy in the general community; reduced mental illness stigma across Tasmania; and the design and delivery of mental health services that include the voice of consumers, carers and families in the development, assessment and improvement of services.

Priority: Establishing data, quality and consumer focused methodology and practice

Rethink Mental Health Reform Directions

1. Empowering Tasmanians to Maximise their Mental Health and Wellbeing
4. An Integrated Tasmanian Mental Health System
7. Responding to the needs of Specific Population Groups
8. Improving Quality and Safety
10. Monitoring and Evaluating Our Action to Improve Mental Health and Wellbeing

Aims

There are two components to this submission:

1. Implementing an NGO version of 'Your Experience of Service' (YES) – Australia's National Mental Health Consumer Experience of Service Survey Instrument. The survey will review and evaluate all NGO services through the consumer lens, identifying needs and service gaps, with findings being used to support continuous service improvement. Conducted in parallel with the Department's clinical services YES survey (which is an action in the 10 year mental health plan), the NGO survey will provide comparable data across both sectors.
2. Increasing consumer and carer understanding and input into the implementation of *Rethink Mental Health; A Long Term Plan for Mental Health in Tasmania*. This will include conducting a three-yearly consumer and carer consultation process (along the lines of the original Rethink consultations) as part of the monitoring and reporting processes for the evaluation of the 10 year plan.

Objectives

- Actively support NGOs to engage consumers in service planning, delivery, evaluation and quality assurance.
- Uncover the degree to which consumers are involved and engaged in their care.
- Inform service-level quality improvement.
- Ensure NGOs funded to provide mental health services are accountable and transparent in service delivery.
- Coordinate and enable a uniform approach to analysing and responding to consumer feedback on their interactions with the Tasmanian mental health system across community mental health services.
- Ensure that NGOs delivering mental health services have consumer engagement mechanisms (particularly in the area of evaluation of services) and that these mechanisms are a key quality indicator in their organisation.
- Foster and encourage a culture of consumer engagement and quality improvement across community mental health services.
- Guarantee that Tasmania has an established means to evaluate service performance and delivery as perceived by consumers and carers across public and community managed mental health services.
- Provide opportunities for the development of a much better strategic understanding of the Tasmanian mental health service system as appropriate to the needs and circumstances of consumers and carers.
- Understand the perspective of consumers and carers on the progress of the 10 year plan and ensure that perspective is communicated to government, stakeholders and the broader health and community sector.

Stakeholders

- MHCT Members and other NGOs funded by Government to provide mental health services.
- Mental Health consumers and carers and organisation bodies (including Flourish and Mental Health Carers Tasmania).
- Government – DHHS, DPaC, MHADD, public mental health services, THS.
- Tasmanian Government and Peaks Strategic Forum.
- Primary Health Tasmania.

Key Milestones

1. Project planning and development

NGO YES Survey:

- YES licencing requirements investigated.
- Develop a Project Plan in partnership with DHHS, other stakeholders and MHCT Board to be delivered in parallel to the clinical services YES surveying.
- A clear framework completed with input from stakeholders.
- Strategy developed to effectively engage community managed mental health providers, consumers and carers.
- Meeting/s held with stakeholders to introduce the program and licensing arrangements for YES.
- Investigate evaluation tools currently in use – develop strategies for addressing duplication or additional administrative load
- Reference group established to share information and monitor the work of administering YES and organising triennial consultations with consumers and carers. The group would include representation from Flourish, Mental Health Carers Tasmania and Carers Tasmania and other stakeholder organisations where appropriate.
- The YES survey instrument is available for use by appropriate organisations that enter a licensing agreement specifying conditions of use which are aimed at promoting consistency of use and reducing the risk of multiple versions being used.
- A roll-out schedule developed in conjunction with members based on a recruitment and engagement strategy developed with the reference group.
- Undertake consultation process with NGOs and DHHS to reach consensus regarding survey questions – this will include exploring opportunities to include additional questions.
- Meeting schedule for the group and Terms of Reference which outlines processes to effectively and efficiently manage the project is developed.

Rethink Consultations:

- Develop an Engagement Strategy in partnership with DHHS, other stakeholders and MHCT Board to inform consumers and carers of Tasmania's 10 year mental health plan.
- Development and planning regarding 2017 consultations.

Outcomes

- Mental health sector organisations are actively engaged with a collective approach towards engaging consumers and carers in the evaluation of their services, and responding to what these surveys tell them.
- A system is in place for data comparison with consumer experience of clinical and community mental health services.

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- Service efficiency, effectiveness and quality, along with consumer and carer satisfaction become key considerations when looking at refining and improving service delivery in the NGO community-managed sector.
- Consumers are considered the experts in their own mental health. Consumers are empowered through increased engagement and participation and evaluation of NGO mental health services.
- Government and NGOs are able to get a broader picture of how the services provided are working for consumers and carers – this will also provide guidance for broader sector development.
- The barriers between the public mental health sector and the non-government community mental health sector are diminished as the validity and effectiveness of recovery interventions delivered and managed through the community sector are better understood and respected across the whole of the service system.
- Consumers, carers and the Tasmanian community are aware of the 10 year plan and how it is being implemented.

2. Implementation

NGO YES Survey

- Schedule agreed upon for roll-out of survey and participating NGOs contacted before each due date.
- Procedures agreed with NGOs funded by government to provide mental health services.
- Information sessions provided to familiarise NGOs with the survey instrument and their role in administering it.
- MHCT will facilitate negotiations and agreement with individual NGOs in regards to implementing the survey tool, data collection and ensuring reporting mechanisms are meeting their needs.
- Regular liaison with stakeholders.
- MHCT to work closely with participating sites and provide necessary support to implement and maintain survey tool and data collection processes
- Data reporting and recommendations – MHCT, with reference group to provide an independent sector report that highlights the work and achievements of the NGO sector.

Rethink 10 year plan

- Policies, procedures and protocols have been amended to incorporate consumer and carer feedback about the carer and family evaluation of the progress of the Tasmanian 10 year plan for mental health services.
- A structured approach to facilitate and report consumer and carer feedback is in place.
- Strategic partnerships with carer and consumer organisations to support process and communications are in place.

Outcomes

- There is increased understanding and capacity to recognise best practice and innovative services.
- Increased recognition and evidence of the implementation of recovery oriented models of care.
- Responses from consumers and carers continue to help point the way for redeveloping programs and ensuring that consumer identified need is foremost.
- Enhanced organisational performance and assistance through the systemic identification of those areas in which services are performing well and recognising opportunities for service enhancement.
- Increased consumer satisfaction with mental health services is based not only on being asked about their experience of service and care but importantly on having their feedback lead to positive change.
- The implementation of the 10 year plan continues to be informed by consumers and carers.

3. Communication strategy

- Develop engagement strategy to ensure all stakeholders are well informed and linkages between groups are established.
- Establish distribution lists for communications.
- Develop guidelines (with reference group) for appropriate language, use of language and delivering programs and information responsibly.
- Reports on the outcomes of both activities are disseminated to stakeholders for input into service design:
 - 1. NGO YES survey report and recommendations**

To determine how well NGOs are perceived to be delivering services to consumers, MHCT working in collaboration with the Department on the data collation and analysis, will then produce an independent sector report.
 - 2. 10 year plan consumer and carer consultations**

To gather feedback from consumers and carers regarding the progressive impact of implementing the 10 year plan. Consultation results collated and analysed and report produced by MHCT.
- Feedback from the consumer's perspective is a good measure of the effectiveness of a service and provides an evidential basis for improvement of services and guidelines for the creation of new services.

Outcomes

- Consumer satisfaction is recognised as an important concept in mental health services and one which puts consumer perceptions at the forefront of service provision.
- The key stakeholders are utilising consistent appropriate language in reference to the NGO Yes Survey and the consumer and carer consultation process for the 10 year plan.
- Communications provide greater linkages between clinical, NGO and consumers and carers.
- Stakeholders show a strong commitment to collaborate/share information and discussion.

Evaluation

- 1. NGO YES survey**
 - The collation and evaluation of survey responses.
 - Evaluation of the instrument following survey implementation – this refers in particular to reviewing the additional questions – and refinement of the instrument informed by this evaluation.
 - The information provided in the reports is discussed by the stakeholders with the intention of drawing lessons from the information provided by consumers and carers.
 - Consumers and carers are consistently involved in the evaluation of NGO services.
- 2. 10 year plan consumer and carer consultations**
 - The collation and evaluation of findings from the consultations.
 - Evaluation of the consultation method and refinement based on this review.
 - Consumers and carers are engaged in reviewing the implementation of the plan.

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Outcomes

- Increased understanding of what works in mental health services, programs and supports and what can be improved.
- Service providers demonstrate that their services are transparent and are meeting their funding accountability requirements.
- Program continues to be promoted, refined and with increased participation.
- A means to identify and respond to service provision gaps or deficiencies.
- The YES survey instrument becomes a standard tool for NGOs in the mental health sector.
- The consultation methodology continues to provide meaningful responses from consumers and carers to the mental health system in Tasmania.

Budget

Service Delivery Expenditure	Year 1	Year 2	Year 3
Salaries and On-costs <ul style="list-style-type: none"> • Project Officer (@.2FTE) • Project Manager 	\$29,200 \$6,500	\$30,350 \$6,750	\$31,550 \$6,775
Project Administration Fee	\$6,000	\$10,000	\$6,000
Travel and Accommodation	\$3,000	\$1,500	\$1,500
Office On-costs	\$2,500	\$2,500	\$2,500
Venue Hire and Catering	\$2,000	\$1,000	\$1,000
Evaluation and Final Report (in collaboration with Department)			TBD *
First 10 year plan consumer/carer consultations – stakeholder liaison, forums, final report and recommendations		\$35,000	
Marketing and Promotion (E-News, updates, program promotion)	In kind	In kind	In kind
Sector Engagement and Consultation (regional and sector meetings and engagement)	In kind	In kind	In kind
TOTAL EXPENDITURE (excluding GST)	\$49,200	\$87,100	*

* This will be determined after consultation with the Department. We suggest that if the Department is engaging a consultant to provide this service for the clinical YES survey, the same consultant could also evaluate the NGO YES survey and provide a report in collaboration with MHCT.

‘Mental Health Starts Here’:

A program to increase mental health awareness and reduce stigma

Rethink Mental Health Reform Directions

1. Empowering Tasmanians to Maximise their Mental Health and Wellbeing
2. A Greater Emphasis on Promotion of Positive Mental Health, Prevention of Mental Health Problems and Early Intervention
3. Reducing Stigma

Aim

To increase Tasmanians’ mental health literacy by equipping them with the knowledge and skills to; maintain their own mental health and wellbeing, build tolerance and understanding towards mental illness and recognise the signs and interventions available to support mental ill-health and suicide prevention. MHCT will achieve this by targeting and working with schools, workplaces and community networks to adopt an approved, standardised approach towards implementing mental health promotion and education.

Objectives

- To strengthen health literacy and mental health and wellbeing promotion in Tasmania.
- To decrease stigma and stereotypes about mental health conditions and illness.
- To increase awareness and understanding of signs and supports available for mental ill-health.
- To encourage and facilitate strategies for building resilience – particularly in regard to suicide prevention – across the Tasmanian population.
- To improve collaboration with mental health agencies, community mental health providers and Tasmanian communities.
- To encourage a consistent, standardised approach towards the education and awareness of mental health in Tasmania.
- To increase awareness and implementation of evidence based resources and programs available to improve mental health and wellbeing.
- To develop a network of ‘registered’ schools and organisations who receive support to implement, evaluate and stay updated on the range of resources, programs and tools available to promote mental health and wellbeing.
- To develop linkages between the community mental health sector, education, industry and the broader community.
- To strengthen MHCT member organisations to deliver programs that meet an agreed set of criteria.

Stakeholders

- MHCT Members and national organisations who can provide resources and programs for school / workplace specific communications.
- Organisations that are already delivering to these sectors (e.g. Worksafe TAS, beyondblue).
- School principals, school associations, students and parents and friends groups.
- Employers, employees and employment organisations, TCCI.
- Government - DHHS, MHADD, DoE, Worksafe Tasmania.
- YNOT and other youth related services.
- Tasmanian Suicide Prevention Community Network (TSPCN), Rural Alive and Well (RAW), Wesley Life Mission – to link in with existing regional community action groups.
- Lifeline, Sane Australia, Mindframe, Relationships Australia

Key Milestones

1. Program scoping and resource development (year 1)

To determine what is available, what is happening and establish parameters to determine an approved providers list and develop resources to support participation. Activities in this phase of the project will include:

- Establish a working group to support the project, influence guidelines, resource development and monitor the work.
- The approval process for this project will involve the examination of evidence, research and existing evaluations of programs as reviewed and agreed on by the expert reference group.
- An environmental scan to assess current practices – the range of programs and resources currently being used, identify outcomes and measurements.
- Review of initiatives currently implemented – e.g. Kidsmatters, Mindmatters, Heads Up.
- Work with MHCT members to identify capacity for organisations to deliver mental health promotion within Tasmanian schools, workplaces and communities.
- Scoping exercise – the range of mental health education programs and resources available (including printed resources, programs and digital tools), identify best practice, measurement tools.
- Identify and benchmark best practice and evidence based interventions.
- Develop agreed targets and implementation strategies – separate approaches to be taken for schools and workplaces.
- Develop a set of agreed criteria based on best practice to ensure programs are meeting objectives and adopt an evidence based approach – this will form a service delivery listing that will be a resource in the ‘toolkit’.
- Framework strategy drawn up and agreed – project delivery, timeframes, targets, evaluation and review.
- Design school and workplace ‘toolkits’ detailing the range of ‘approved’ programs, information and services available that can be used by schools and workplaces to develop their mental health programs.
- Develop Guidelines to support school and workplace participation – “How to” guides will cover topics including; deciding what you want to deliver, tackling suicide prevention in a responsible way and encouraging self-help and peer support. A particular focus with this work will include guidance, resources and the protective measures available to staff delivering programs and the steps to take if a person at risk is identified.
- Establish partnership with existing community networks – e.g. TSPCN, RAW and Wesley Life Mission have established a number of Community Action Groups around Tasmania. Partnering with these groups and others will enable the groups to engage with and influence the work being implemented.
- Design evaluation strategy that will encompass evaluating services, resources, participating schools and workplaces and individuals.

Outcomes

- Schools and employers are responsibly engaged in evidence based mental health promotion activities and programs.
- Mental health sector organisations are actively engaged with a collective approach towards raising awareness and reducing stigma.
- Links are established between community services, education, industry and employment.
- A strategy to support continued development of PPEI (Promotion, Prevention and Early Intervention) initiatives in schools and workplaces are supported by continued strategic development.
- Tasmania has an established state wide program that targets mental health literacy and reduces stigma.
- Established mechanisms for community partnerships and member organisations to build and grow their own organisations.
- A framework to ensure consistent language and messaging is adopted across the state and across sectors.
- There is increased recognition of strategies and interventions to support better mental health outcomes.
- Increased understanding of the range of resources, training and support to meet the mental health needs of employees, students and peers.

2. Program Implementation (years 2-3)

Schools, workplaces and community networks are encouraged to sign up to the 'Mental Health Starts Here' program. This commitment involves planning programs and activities to promote mental health and wellbeing. The work of navigating what programs are available, how effective they are and what resources are available has been completed for them, they need simply follow the guidelines to plan the programs and activities that suit their needs – additional support to design and implement a program will be available.

- Recruitment strategy completed and underway.
- Procedures / MOUs agreed with all participating schools and employers.
- Linkages and partnerships with education and resource providers are established.
- Work closely with MHCT members to ensure their programs and resources will meet the agreed criteria.
- School and workplace 'toolkits' are disseminated – project officer provides briefings and individual consultation to support participation.
- Regular liaison with participating schools, employers, and stakeholders.
- Promote the range of courses and training available to upskill staff who are responsible for implementing a program – for example, mental health first aid training.
- Regular reporting to reference group for review and feedback.
- Scoping maintained to ensure relevance and currency of resources and programs.
- Regular scanning of new programs, initiatives, best practice examples, websites and apps.
- Regular E-Newsletters are distributed – one for schools and one for workplaces. These newsletters will provide an effective mechanism to keep members engaged and abreast of new initiatives and resources, as well as provide examples of how others are delivering prevention and awareness raising messages.
- Establishing an annual awards program for 'Mental Health Starts Here' Champions – as well as school and employers, it could include community and service provider and innovation awards.
- Establish a school specific Mental Health Week grants program to coincide with larger events and activities around Mental Health Week and allowing for flexibility around the school term dates.

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- Program review with schools in particular regarding grades – how have students of different ages responded to the program, how is the school anticipating how their knowledge can be built upon?
- Program review with employers – what do their workplace policies reflect in regards to mental health literacy? How has it impacted on their workplace culture?
- Participating sites are selecting from a range of recognised ‘approved’ programs and services – quality assurance standards are established.

Outcomes

- A strong, sustainable program to improve mental health literacy and awareness in Tasmania is established.
- As the peak body, MHCT can demonstrate broader representation and engagement from community, education and employment sectors.
- Increased awareness of services and programs that can directly support mental health and suicide prevention in youth and in the workplace.
- Tasmanians recognise the signs and risk factors related to mental ill-health and have a greater understanding of how to seek help for themselves or others.
- There is a demonstrated increase in knowledge of suicide prevention and the supports available.
- Increased access for Tasmanian youth to develop skills and knowledge relating to mental health literacy and suicide prevention.

3. Communication Strategy (year 1-3)

To ensure stakeholder communication is consistent and coordinated. It will include the development and distribution of program materials and resources as well as provide the framework and guidelines for stakeholders to develop and implement their own promotion and engagement strategies.

- Develop engagement strategy for target groups/sectors – young Tasmanians, parents, teachers, students, employers, employees and the broader community.
- Establish distribution lists for communications.
- Develop guidelines (with reference group) for appropriate language, use of language and delivering programs and information responsibly.
- Develop and produce “How to” Guides, toolkits and promotional resources.
- Work with stakeholders and media to promote the program, highlight ‘champions’ and promote best practice.
- Liaise with media to promote program and best practice stories.
- Coordinate and arrange the awards ceremony as part of a Mental Health Week awards ceremony event
- Updates are provided as appropriate to ensure currency and relevance.
- Methods are established to ensure sustainability – regular school and workplace E-newsletters are being disseminated to ensure continuing engagement and examples of best practice are promoted.

Outcomes

- A consistent and standardised approach to language is used by schools, employers and community networks.
- Media and promotion is coordinated – key messages are agreed upon and adopted and delivered by all stakeholders.
- Stakeholders show a strong commitment to collaborate/share information and discussion.

Evaluation

To ensure targets and objectives are being met and measured. Evaluation will include pre and post evaluation strategies to determine where current understanding was and how it has improved across the stakeholder groups since the program commenced. It will provide valuable data to establish benchmarks for mental health literacy, measure the effectiveness of increasing awareness regarding signs and safe intervention methods and the success of various media (e.g. web sites, apps, printed resources, on site programs).

- Design an evaluation strategy (with reference group).
- Appoint external evaluator and develop internal (ongoing) evaluation mechanisms to support program review and implementation.
- Determine evaluation targets and timelines.
- Annual report to be provided to stakeholders.
- Mental health and emotional well-being practice has been successfully built into orientation, policies and processes of participating workplaces.
- Linkages between community mental health services and education, employment and community sectors are established.
- Benchmarking is set to determine ongoing mental health literacy improvements and improvements are able to be demonstrated.
- Education and activities are being delivered in a consistent and responsible way.
- Increased engagement from key stakeholders – stronger community partnerships.

Outcomes

- Mental health, healthy behaviours, resilience and balance have become part of the learning umbrella based on the principle that “there is no health without mental health”.
- There is measurable evidence that Tasmanians have an increased awareness and understanding of their mental health and wellbeing.
- There is demonstrated growth and continued engagement with the program from participating sites.
- PPEI principles and practices are widely adopted across the state:
 - Employers and businesses are pro-actively engaged with mental health promotion (evidence of workplace practice also supporting this).
 - Tasmania has a state wide program that ensures Tasmanian children and youth are aware of their mental health – there is demonstrable evidence of increased awareness and understanding.
- The Tasmanian community mental health sector is actively engaged with education, industry and community sectors.

Budget

Service Delivery Expenditure	Year 1	Years 2	Year 3
Salary + on-costs – Project Officer (@1 FTE) <ul style="list-style-type: none"> Year 1 – to focus on program mapping, stakeholder engagement and program development Years 2-3 – to oversee program implementation, working with members to meet criteria, supporting schools and workplaces to implement activities and programs, updating resources and programs and collating feedback and evaluation 	\$81,000	\$85,000	\$89,000
Project Administration (incl. Secretariat for reference group)	\$18,375	\$17,000	\$25,000
Project Management	In kind	In kind	In kind
Travel and Accommodation	\$8,000	\$6,000	\$6,000
Office on-costs	\$10,000	\$10,000	\$10,000
Resource, Design and Development	\$8,000	\$2,000	\$2,000
Printing Costs	\$5,000	\$2,500	\$2,500
Independent Evaluation – comprehensive evaluation of stakeholder engagement, program participation and individual learning, retention and skill development	---	---	\$35,000
Marketing and Promotion (media, E-Newsletters, website updates, general communications)	\$6,500	\$3,250	\$3,250
IT and Telecommunications	\$2,000	\$2,000	\$2,000
Venue Hire and Catering	\$1,000	\$1,000	\$1,000
Miscellaneous (training, conference attendance)	\$1,000	\$1,000	\$1,000
Schools Mental Health Week event grants program	---	\$15,000	\$15,000
TOTAL EXPENDITURE (excluding GST)	\$140,875	\$144,750	\$191,750