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**Mental
Health
Council**
OF TASMANIA



Capacity building: Sector, workforce & community

2020-2021 Budget Priority Submission
Mental Health Council of Tasmania

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Introduction

The Mental Health Council of Tasmania (MHCT) is a member based peak body. We represent and promote the interests of community managed mental health services and have a strong commitment to enabling better access and outcomes for every Tasmanian.

Currently, Tasmania's mental health system is undergoing several reforms, many of which are in development or in their infancy of implementation; including the delivery of the Mental Health Integration Taskforce Recommendations, [the Tasmanian Joint Mental Health and Suicide Prevention planning process](#), due to be completed by July 2020, [the Productivity Commission's Inquiry into Mental Health](#) and State government's Review of the Mental Health Services Helpline and Crisis Assessment and Treatment Teams (CATT). These initiatives highlight that State and Federal Government are committed to take action to address and improve the mental health system.

MHCT welcomes the [State Government's Response to the Mental Health Integration Taskforce Report](#), and acknowledges MHCT's participation in implementing recommendations 15 and 17. These recommendations focus on partnering with DoH to explore ways to achieve greater integration of the full range of disability and social services that may need to be accessed by a person as part of their full participation in their community, along with partnering with Consumer and Carer Peak bodies to develop and trial a model similar to the 'Recovery College' concept. MHCT is awaiting further details on the implementation of these recommendations and looks forward to supporting these valuable actions.

In acknowledging the work already being done, MHCT has however identified several gaps, specifically at the state level. These gaps include addressing the issues of recruiting and retaining a quality mental health workforce in Tasmania; addressing ongoing and significant access and navigation issues for individuals, GPs and service providers; along with addressing gaps for individuals and their families as Tasmania transitions to the full NDIS scheme.

In developing our Budget Priority Submission 2020-2021, MHCT has consulted widely with both our members and a range of stakeholders in the mental health sector over the course of this year, to understand and address urgent concerns about universal and ongoing pressures that exist within Tasmania's mental health sector including:

- A 12-month funding cycle established by State government on Community Managed Mental Health (CMMH) services that significantly restricts the ability of organisations to effectively plan, develop and deliver seamless supports and maintain workforces. A collective view from the sector is that this 12-month funding cycle must urgently be replaced by a model that provides surety, stability and allows for more effective financial program planning and delivery, whilst supporting workforce creation and retention. Previously, service agreements were 3-year contracts - providing stability, viability and the security to effectively forward plan. Significant concerns have been expressed by many service providers, some in their third year of 12-month service

agreements, who are advising their programs, planning and delivery are at great risk. This includes reports of loss of staff and professional development restrictions created by a lack of security and an inability to offer longer contracts. MHCT requests 3-year contract agreements be reintroduced as a priority within the 2020-2021 period.

- An ongoing distinct lack of clarity and confidence from the CMMH sector in the transition process to the National Disability Insurance Scheme (NDIS) in the state, and clarity on the role and responsibility of State Government - whilst acknowledging the nuances in jurisdictional responsibilities between the Commonwealth and States around the transition. While we are approaching the final stages of transitioning to full scheme, providing surety of suitable and adequate support to those who are ineligible or still in the process of considering applying for the NDIS remains unclear. What the State Government will provide in terms of mental health supports and ensuring continuity of support needs to be determined and communicated as a matter of priority. This includes assurances regarding accommodation as CMMH Supported Accommodation services transition to Supported Independent Living (SIL) arrangements under the NDIS. Concerns have been raised that this will limit the provision of transitional beds and at the moment it is not clear how this gap in short-term accommodation will be fulfilled. MHCT suggests a review and subsequent plan is established for meeting short-term accommodation needs as the shift to SIL arrangements becomes clearer.
- Ongoing community uncertainty about how and where to access the right mental health supports and services, and on how to navigate the service system in its entirety. Whilst MHCT welcomes the State Government's Review of the Mental Health Services Helpline and Crisis Assessment and Treatment Teams (CATT), what has become clear from MHCT's consultations is the continuing struggle for individuals, families, service providers and GP's in accessing and navigating the Tasmanian mental health system. MHCT's proposed '[Centralised Mental Health Access Service](#)' outlined in our Submission to State Government addresses these concerns through a centralised phone service that supports all Tasmanians to navigate and access Tasmania's mental health system, from crisis and acute responses through to preventative and early interventive supports. A centralised service will significantly reduce pressures and presentations within our hospital and acute health system, diverting people toward earlier supports and interventions, and away from Emergency Departments when they are at the point of crisis.

In response to these and other concerns, and taking into account both the stated goals of [Rethink Mental Health](#), [the Fifth National Mental Health and Suicide Prevention Plan](#) and MHCT's previous Budget Priority Submissions, MHCT has identified four key initiatives to support the Tasmanian mental health system and bolster the capacity of our sector and our communities going forward.

1 | Implementing the Tasmanian Peer Workforce Development Strategy

The growth and expansion of the peer workforce in Tasmania is identified as a key priority in both the Tasmanian Government's [Rethink Mental Health plan 2015-2025](#) and the [Government Response to the Mental Health Integration Taskforce Report and Recommendations](#) - July 2019. Both the Tasmanian and Commonwealth Governments recognise that peer workers play a crucial role in mental health services. In response, MHCT was funded by the State Government to develop a Peer Workforce Development Strategy for Tasmania.

[The Tasmanian Peer Workforce Development Strategy](#) aims to recruit and retain peer workers across all streams of the Tasmanian mental health sector. The Strategy was launched by the Minister for Mental Health and Wellbeing, Hon. Jeremy Rockliff on 19 November 2019. However, to fully implement the Tasmanian Workforce Development Strategy dedicated resources need to be allocated to deliver on the Strategy's identified Action Plan.

► *Solution* **Recruitment of a Peer Workforce Coordinator**

To continue to build a professional peer workforce, MHCT requests that a Peer Workforce Coordinator role should be determined and supported to deliver on the implementation of the [Peer Workforce Development Strategy Action Plan](#). The Coordinator's role would include immediate, medium and long-term priorities.

Within the immediate and medium term, the following deliverables will be achieved:

- Support work to promote the benefits of the peer workforce and improve workplace knowledge on peer work roles
- Develop and undertake an annual survey into the size, nature of and attitudes towards the peer workforce in Tasmania
- Identify and engage with relevant peer work projects and initiatives that leverage peer support, supervision and mentoring opportunities
- Support organisations to plan a model of care that integrates meaningful peer work roles with clear expectations

Costs

\$320,000-360,000 over 3 years (dependent on establishing FTE and project scope)

This represents a total budget cost, but as indicated in the Peer Workforce Development Strategy, it could be reasonably expected that the Australian Government through Primary Health Tasmania would contribute towards the creation of this role.

2 | Suicide Prevention Sector Capacity Building

2.1 Suicide prevention awareness raising and safe communications

The [Tasmanian Suicide Prevention Strategy 2016 – 2020](#) prioritises the development and implementation of the first state-based Charter, the Tasmanian Mental Health and Suicide Prevention Communications Charter. MHCT has been funded by state government to take carriage of this important priority.

The [Tasmanian Communications Charter](#) builds the capacity of the sector and the community through the promotion of a shared understanding and common language around mental health, mental ill health and suicide prevention with the aim of reducing stigma and promoting help seeking behaviour.

Through MHCT's work, the Tasmanian Communications Charter and accompanying [Safely Talking Toolkit](#) has provided a vehicle to build a shared understanding and common language around mental health and suicide prevention across the sector and within our local communities. To date, 324 individuals have signed the Charter and a further 24 organisations have declared their support for the Charter, including: Lifeline, Speak UP Stay ChatTY, Kids Helpline, TasTAFE and headspace.

The Tasmanian Communications Charter platform informs individuals and organisations on best practice in relation to communicating safely about suicide and suicide prevention. However, this requires a consistent and sustainable approach to support the ongoing dissemination of information and resources from national programs, along with monitoring public communications about suicide and suicide prevention and supporting more individuals to discuss and raise awareness of suicide prevention safely.

► *Solution* ***Continue the growth of the Tasmanian Communications Charter***

To continue to support the sector and the community in raising awareness of suicide prevention safely, MHCT requests that the Tasmanian Communications Charter is maintained to deliver the following key elements:

- Grow the network of organisations and individuals signed to the Tasmanian Communications Charter
- Support individuals to raise awareness of suicide and suicide prevention safely through the Tasmanian Communications Charter online training
- Provide Safely Talking workshops to the community including media outlets and public figures

- Maintain a register of speakers who provide suicide prevention awareness raising activities in the community under the guidelines of the Safely Talking toolkit
- Continue to monitor stigma and unsafe messaging within public communications and media in Tasmania
- Review the Communications Charter to accommodate and promote guidelines relating to social media
- Support a safe and consistent approach to World Suicide Prevention Day events in Tasmania

Costs

\$270,000 over 3 years (\$90,000 per year)

2.2 Suicide prevention program evaluation, quality and improvement

The community managed suicide prevention sector provides education and awareness raising initiatives to build the capacity of our communities in identifying and responding to individuals who may be at risk of suicide. Consistent with the Fifth National Mental Health and Suicide Prevention Plan, education and awareness-raising initiatives have been identified as key elements in addressing suicide prevention.

However, what is not immediately clear is how these education and awareness-raising programs are effecting change within Tasmanian communities. The National Mental Health Commission's, '[Monitoring Mental Health and Suicide Prevention Reform National report 2019](#)', and '[Productivity Commission Mental Health Draft Report](#)' both highlight the need for better evaluation of current suicide prevention programs. It is important that commissioning bodies know what initiatives and programs are working well, so funding can be directed into best practice programs effecting real change within our local communities.

Whilst some work is being done to evaluate and monitor suicide prevention programs at a national level, Tasmania is not as yet seeing a downward trend in suicide rates. What Tasmania needs is to effectively identify what programs are working well so that these identified programs are delivered to our communities in a timely manner.

► *Solution*

Develop a state-based Suicide Prevention Quality and Improvement Program

To ensure quality suicide prevention programs are delivered to Tasmanian communities, MHCT proposes a Suicide Prevention Sector Capacity Building program that would support service providers to monitor, measure, evaluate and improve their programs while assisting

commissioning bodies in their decision-making processes. Key deliverables of the program include:

- Build on the Tasmanian Communications Charter platform to support the sector in building skills to measure, monitor and improve their programs via workshops, forums and online training offerings
- MHCT to partner with UTAS to support the sector through a face-to-face training and mentoring program to upskill the sector around program evaluation and building best practice
- Use participatory research methods to evaluate Tasmanian suicide prevention programs, identifying what works well, for whom, and at what stage in their mental health
- Commissioning bodies can identify most suitable programs for funding through improved evaluation and measurement modelling
- Tasmanians receive quality programs that are evidenced to provide effective change within their communities

Costs

\$500,000 over 2 years, comprising:

- \$250,000 year 1, program development
- \$250,000 year 2, program implementation

3 | Build the capacity of young Tasmanians to address mental ill-health, mental health and wellbeing

[Mission Australia's seven-year youth mental health report 2019](#), identified an increase in young people experiencing psychological distress, and noted the top three issues of personal concern as: 1. coping with stress; 2. mental health; and 3. school or study problems. Additionally, the [Tasmanian Department of Education 2019 Student Wellbeing Survey](#) indicated that emotional regulation and satisfaction with life are at their lowest levels between years 9-10, while sadness and worries are at their peak.

While work is being done to effectively and consistently support student wellbeing and mental health at both national and state levels, the 2019 Tasmanian Youth Mental Health Forum brought together key stakeholders from State and Federal government agencies, community-managed mental health services, health professionals and peaks representing young people to discuss innovative and collaborative ways to address the youth mental health system in Tasmania. A key action identified by Forum participants was the need to establish a trial school-based mental health peer support program.

In addition, with the majority of school-based initiatives focusing on the provision of professionals to provide support to young people, the [2018 YNOT Youth Forum](#) identified that Tasmanian youth are more likely to firstly go to their friends and family for support around mental health concerns. However, many young people felt they did not possess the skills required to support their friends experiencing a mental health crisis, or who may reach out to their peers at some point to discuss their mental health and wellbeing. In addressing youth mental health, MHCT believes that equipping young people with the skills to support their friends in managing their mental health and wellbeing is an important component that utilises an early intervention, strengths-based approach.

Benefits of Youth Peer to Peer Models

Adolescence is a time of personal identity and social development. Since adolescents are invested in same-age peer relationships, youth peer support offers a complimentary alternative to the 'expert' health professional model. Having insider knowledge of existing youth social norms makes it easier for peers to relate to each other as they naturally understand the pressures associated with being a young person in 2020. Youth peer support programs help to reduce youth's self-stigma and provide youth with support, encouragement, hope and belief in themselves to help overcome personal barriers.

Reference: <https://www.cymh.ca/en/projects/youth-peer-support.aspx>

► *Solution*

Trial and Evaluate a Schools-Based Mental Health Peer Support Program

[The University of Melbourne has recently evaluated the impact of teen Mental Health First Aid \(tMHFA\).](#) tMHFA is a mental health literacy program for high school students in years 10-12 which aims to improve peer support towards young people who may be at risk of suicide. The researchers from the University of Melbourne evaluated the tMHFA program at four Victorian government schools where they surveyed 800 students in years 10-12. The results indicated that students who undertook the training were 35 times more likely to report adequate suicide first aid than those in the control group. This included noticing when something is wrong, asking if their friend is OK and suggesting they tell an adult. Utilising a similar model to the recently evaluated initiative, MHCT proposes the implementation of a pilot peer support program. Within the 2-year timeframe, the following deliverables will be achieved:

- Develop a framework and guidelines to support implementation of the pilot program
- Identify and partner with selected schools to implement the pilot program, schools will be identified across socio economic backgrounds along with urban and outer regional areas
- Teen Mental Health First Aid (tMHFA) training will be offered to year 10-12 students within the identified schools
- Interested students who are trained in tMHFA are invited and supported to become Mental Health Student Peer Leaders within their schools
- Mental Health Student Peer Leaders are trained to promote self-help supports and increase understanding of when/who to reach out to for support
- Sufficient and appropriate support and supervision will be provided to Mental Health Student Peer Leaders via existing support staff employed in the identified schools
- Mental Health Student Peer Leaders review and identify the best mental health apps for promoting wellbeing and help seeking
- The program is evaluated in partnership with other agencies such as UTAS
- Scalability of the program is assessed for implementation of the program across all Tasmanian Government schools

Costs

\$300,000 over two years (excluding tMHFA training and school participation costs)

4 | Raising Awareness of Mental Health and Reducing Stigma

Following the success of the 2019 [Mental Health Week \(MHW\)](#) in Tasmania, MHCT requests the continuation of funding to support the MHW Small Grants program and an expanded approach to MHCT's current work in Promotion, Prevention and Early Intervention (PPEI) to target the reduction of stigma in our communities. Currently, MHCT manages the MHW Small Grant program supporting MHW events and activities held in October every year and coordinates MHW's promotional campaign for our entire state.

MHCT believes, given our direct experience, year-on-year growth in engagement, and the feedback from across the state, that we can continue to grow engagement and participation in MHW and achieve even greater success and reach. In 2019, a total of 53 applications for small grants to support events and activities were received. Over 80 public events registered via the MHCT website were held across the state in every region. Greater attendance and community engagement can be achieved through continuing to support MHCT's coordination and promotion of MHW as well as the proposed expansion measures. The expansion is outlined below and is geared to building a stronger, more consistent and impactful campaign and program of activities promoting mental health, wellbeing and stigma reduction in Tasmania.

Mental Health Week campaign and continued commitment to MHW Small Grants Funding

MHCT proposes:

- The continuation of the committed funding in the MHW Small Grants program
- Establishing a Mental Health Week awards program and events for our state which will celebrate and highlight the achievements of the mental health sector, young people, the arts, media and workplaces to promote mental health and wellbeing in their communities
- The continuation of support for the coordination of the Mental Health Week state-wide campaign
- The development and implementation of a year-round, ongoing mental health promotion and stigma reduction campaign, culminating in Mental Health Week

This additional investment would allow for coordinated marketing and promotion targeting stigma reduction and mental health promotion strategies to be delivered year-round, building momentum towards MHW.

Costs

\$100,000 annual investment, comprising:

- \$40,000 MHW annual small grants program continuation (existing 2019 investment)
- \$60,000 MHW awards program and associated events

For further details and information on the Mental Health Council Tasmania's Budget Priority Submission 2020-2021, please contact Connie Digolis, Chief Executive Officer, cdigolis@mhct.org, ph. 03 6224 9222