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Youth Peer Workforce Project Implementation Plan

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Supported by the Tasmanian Government through the Department of Health The Mental Health Council of Tasmania acknowledges the palawa people of lutruwita as the traditional and original owners, and continuing custodians of the land on which we work. We recognise and value their rich and continuing connection to country, to land, water, and culture, and pay respects to Elders past and present.

We acknowledge people with lived experience of mental health challenges, mental illness and recovery. We recognise our work relies upon valuing, respecting, and drawing upon the lived experience and expert knowledge of consumers, their families, carers and friends, service providers, their staff, and local communities.

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Contents

About Us	4
Background	5
Youth Implementation Plan Purpose	9
Governance, Monitoring and Continuous Improvement	9
Youth Peer Workforce Objectives	11
Youth Peer Workforce Priority Areas	12
1. Governance and Advocacy	12
2. Peer Connections	12
3. Organisational Readiness and Culture	13
4. Training and Professional Development	13
5. Workforce Development	14
6. Career Progression	14
Youth Implementation Plan Priorities and Timeframes	15
Priority 1 – Research	16
Priority 2 – Opportunities	26
Priority 3 – Preparation	27
Priority 4 – Training and Qualification Pathways	28
Priority 5 – Building	28
Evaluation	29

About Us

The Mental Health Council of Tasmania (MHCT) is the peak body representing the mental health and wellbeing needs of all Tasmanians, and the community organisations that work with and support them. We work closely with government to amplify the voices of our members and Tasmanian communities, to provide input into public policies and programs. We advocate for reform and improvement within the Tasmanian mental health system. Our purpose is to strengthen and advocate for our communities and service providers to support the mental health and wellbeing of all Tasmanians, and our vision is that every Tasmanian has access to the resources and support needed for good mental health and wellbeing.

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Background

Development of the Peer Workforce Development Strategy 2019 (PWDS) and Lived Experience (Peer) Workforce Development Strategy Implementation Plan 2022

MHCT was commissioned by the Tasmanian Government to develop Tasmania's first Peer Workforce Development Strategy (PWDS) which was launched in November 2019. During the development of the strategy, extensive consultation took place with key stakeholders in the mental health sector including Lived Experience workers, consumers, families, friends and carers. Rethink 2020: A state plan for mental health in Tasmania 2020-2025, recognises the importance of strengthening the Lived Experience workforce in Tasmania. It is evident in Tasmania and recognised interstate and internationally that the role Lived Experience workers have in mental health services is essential. The PWDS highlights the positive impact that Lived Experience work has on the lives of people experiencing mental health challenges, as well as their family, friends and carers.

In 2021, MHCT received funding to implement the PWDS. The Lived Experience (Peer) Workforce Development Strategy Implementation Plan was guided by input from Primary Health Tasmania, Mental Health, Alcohol and Drug Directorate, Mental Health Lived Experience Tasmania (formerly Flourish Tasmania), Mental Health Families and Friends Tasmania and the peer workforce. The strategy was released in 2022, with actions currently being implemented across the mental health sector in Tasmania.

Youth Peer Workforce Policy Context

Throughout 2020-2021, MHCT was contracted to monitor the impacts of COVID-19 on the mental health and wellbeing of community and demand for services within the community mental health sector. The work identified a distinct need to address challenges facing young people in accessing mental health supports and services. Consequently, MHCT undertook extensive consultation with young people to inform the COVID-19: A mental health response for young Tasmanians and Tasmania's Child and Youth Wellbeing Strategy.

A number of priorities were identified, with youth Peer Workers strongly identified as a preference for young Tasmanians and highlighted as a key action within the Tasmanian Child and Youth Wellbeing Strategy. The Child and Youth Wellbeing Strategy Action Plan indicates that a Youth Peer Worker Model will be established as part of the Tasmanian Peer Workforce Development Strategy.

This will enable young people living with mental health challenges to have the support of a person who has recovered from their own personal experience, to provide advice and hope to the young person and their families during their mental health journey,' (Child and Youth Wellbeing Strategy Action Plan 2021).

The need for a youth-specific peer work project

As it relates to the peer workforce, the youth lens is a unique watermark that seeks to understand and call attention to the current contexts and experiences of youth and their impact. While all people have a lived experience of growing up, the defining element of this lens is the meeting point of time, the young person and the peer work relationship. This understands that times continuously change, and that young people today are facing different experiences of growing up than those of the generations before them.

Development of the Youth Peer Workforce Implementation Plan

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The Youth Peer Workforce Implementation Plan ('Youth Implementation Plan') has been developed by MHCT, drawing on valuable contributions from young people, youth services and community mental health organisations from across Tasmania.

Approximately 55 young people from the following youth networks and groups contributed to the Youth Implementation Plan through in-person consultations and survey responses:

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- Department of Premier and Cabinet Youth Advisory Council
- Derwent Valley Youth Future Action Team

By engaging in in-person consultations and/or participating in a survey, the following 15 community mental health organisations (the contributions from each provider's regional operations have been combined for this statistic) contributed to the Youth Implementation Plan:

- headspace/the Link Service Hobart

- > Youth Family and Community Connections Tasmania
- Psychology CAFFE
- Anglicare Tasmania
- Rural Health Tasmania
- Wellways

- Baptcare Tasmania
- A Tasmanian Lifeline
- Pulse Youth Health Services

The key findings from these consultations were clear and consistent across the state. Young people are asking for the following:

> Youth Peer Workers to be employed in various settings (notably schools, councils/community centres and in clinical settings).

- > Youth Peer Workers should be of a similar age to the young person seeking support (around 18-30 years) but the primary consideration should be their 'life experiences' and 'stage of life'.
- > 'Youth Peer Worker' was preferred to 'Lived Experience' and 'Support Worker' as the role title to encourage role validity and age separation from the Lived Experience Workforce.

The community mental health organisations expressed their interest in employing Youth Peer Workers, coming to a consensus on the following:

- ▷ There is a gap in service delivery that Youth Peer Workers could undertake meaningful work to resolve.
- > A strong training program, ongoing supervision and frequent support are non-negotiable in the employment of Youth Peer Workers.
- Professional development and career progression are essential in encouraging Youth Peer Workers to continue working in the youth mental health sector.

To ensure that young people and carers of young people's voices remained at the forefront, MHCT entered into a secondment agreement with The Link Hobart and Mental Health Families and Friends Tasmania to establish a co-design team to participate in meetings to utilise their lived experience and represent their cohort's experiences in the development, writing and review of the Youth Implementation Plan. This co-design team has steadfastly shown their dedication and passion for youth mental health service innovation and better outcomes for young people living with mental health challenges in Tasmania

Youth Implementation Plan Purpose

The purpose of the Youth Implementation Plan is to provide an understanding of the timeframes and activities that will be undertaken to implement Youth Peer Workers into Tasmanian mental health care settings and more broadly in the community. It is acknowledged that significant change is required to achieve a sustainable Lived Experience workforce in Tasmania, with the Youth Implementation Plan intended to serve as a guide to address the challenges and resources required. It is intended that the Youth Implementation Plan be delivered across various settings including mental health services, youth community centres and local council spaces. The selection of these settings will be discussed and further explored through youth consultations. The activities and objectives of the Youth Implementation Plan are designed to promote an individualised approach and acknowledge that this is necessary to support the varied needs of each potential setting for Youth Peer Workers.

Governance, Monitoring and Continuous Improvement

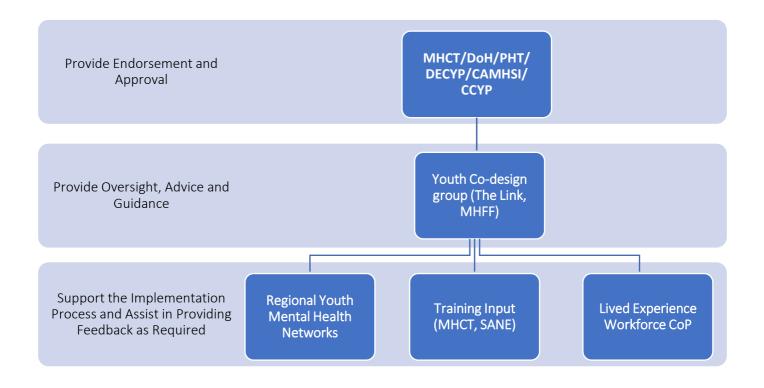
The Youth Implementation Plan will be reviewed on a 12 monthly basis to consider progress and outcomes, changes to the policy environment and identified priorities to achieving workforce development goals.

A Steering Committee will be established and be responsible for oversight, direction and approval of work developed as part of the Youth Implementation Plan. The steering committee will include key stakeholders from relevant government agencies and the child and youth sector such as the Department for Education, Children and Young People (DECYP), Department of Health (DoH) and Primary Health Tasmania.

Additionally, we will continue to consult directly with young people across Tasmania wherever possible. The existing networks will be consulted to inform and support implementation as needed, drawing on lived experience from the Lived Experience Workforce Community of Practice, young people via youth networks and advisory groups, existing Youth Peer Work

programs such as SANE's Peer Guide Program, and broader stakeholder feedback from youth mental health services through the Regional Youth Mental Health Networks established by MHCT.

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Youth Peer Workforce Objectives

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The development of a Youth Peer Workforce in Tasmania aims to achieve the following objectives:

- ▶ Promote the mental health recovery of young people aged 12-25.*
- ▶ Improve mental health outcomes for young people and support for families and friends.
- services
- Raise awareness and understanding of Youth Peer Work within youth settings and across the community.
- * There is no consistent age-range for 'youth' in Australia, with variations between 10 and 25 years of age common. The age range we have adopted is based on the typical age range youth mental health services are offered to, however it is acknowledged that each employing organisation will determine the age range of their Youth Peer Workers as it is relevant and appropriate to their services.

The objectives identified above have been translated into six priority areas for this Youth Implementation Plan that are aligned to the priority areas identified in the Tasmanian Peer Workforce Strategy and include identified goals and deliverables to support meeting the Youth Peer Workforce objectives. A timeframe has been developed for each goal to ensure a logical progression of the implementation for the remainder of the project term.

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Youth Peer Workforce Priority Areas

Priority Area	Goals	Deliverables	Who	Timeframe
1. Governance and Advocacy	Peer advocacy	1.1 Establish Regional Youth Mental Health Provider Networks and co-design team to support implementation	Youth Access Project Officer	August 2022 – December 2022 (completed)
	Policy commitments	1.2 Work with government agencies in creating funded opportunities for Youth Peer Workers within current service agreements and broader opportunities outside of health.	MHCT/Primary Health Tasmania/Department of Health working group	Ongoing/long term (to mid- 2025)
	Resources and guidelines	1.3 Review evidence-based models of Youth Peer Work	Youth Access Project Officer	July 2022 – August 2022 (completed)
		1.4 Work with Lived Experience Workforce Development ("LEW") Coordinator to disseminate the National Mental Health Commission guidelines to employers	LEW Coordinator, Youth Access Project Officer	Medium-term (to mid-2024)
		1.5 Review LEW survey and add further questions to gain understanding of Youth Peer Work in Tasmania	Youth Access Project Officer, LEW Coordinator	Medium-term (to mid-2024)
	Regulation	1.6 Work with the LEW Coordinator to consider workers compensation, liability and other insurance regulation that may impede employment of Youth Peer Workers	LEW Coordinator, Youth Access Project Officer HR Consultant	Medium-term (to mid-2024)
2. Peer Connections	Peer networks	2.1 Establish a network for Youth Peer Workers with regular meetings and professional development opportunities	Youth Access Project Officer	Medium term (to mid-2024)

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Priority Area	Goals	Deliverables	Who	Timeframe
	Peer supervision	2.2 Identify or develop best practice guidelines for supervision of Youth Peer Workers	Youth Access Project Officer/LEW Coordinator	Medium-term (to mid-2024)
	Mentoring and leadership	2.3 Develop a structured mentorship (buddy) program with former Youth Peer Workers	Youth Access Project Officer	Medium-term (mid to end 2024)
		2.4 Continue to convene Regional Youth Mental Health Provider Networks with Youth Peer Work as a standing agenda item	Youth Access Project Officer	Medium-term (mid to end 2024)
3. Organisational Readiness and Culture	Reduce stigma and build supportive workplaces	3.1 Develop best practice guidelines co-designed with young people on workplace needs to support a mentally healthy workplace culture	Youth Access Project Officer, LEW Coordinator, WorkSafe Tasmania, YNOT	Medium-term (to mid-2024)
		3.2 Develop a presentation that can be delivered to all levels of an organisation on the benefits of Youth Peer Workers, their role and how to support them	Youth Access Project Officer	Medium-term (to mid-2024)
		3.3 Provide ongoing support to organisations as required	Youth Access Project Officer	Ongoing/ long-term (to mid-2025)
	Role design and models	3.4 Work with employer organisations to develop guidelines based on Youth Peer Work models	Youth Access Project Officer	Medium-term (to mid-2024)
4. Training and Professional Development	Peer worker training and professional development	4.1 Review SANE Australia training program and invite Tasmanian students to join Youth Peer Work network	Youth Access Project Officer	Medium-term (mid to end 2024)
		4.2 Work with LEW Coordinator to identify traineeship opportunities and/or employment pathways and work experience hours meeting accreditation requirements	Youth Access Project Officer, LEWD Coordinator	Medium-term (mid to end 2024)

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Priority Area	Goals	Deliverables	Who	Timeframe
		4.3 Work with LEW Coordinator to adapt the Peer Induction training course for young people seeking to work as a peer worker and delivery of modules for specific Youth Peer Work roles as necessary	Youth Access Project Officer, LEW Coordinator	Medium-term (mid to end 2024)
		4.4 Work with the regional youth mental health service networks to identify work experience opportunities	Youth Access Project Officer	Medium-term (mid to end 2024)
5. Workforce Development Peer worker roles, guidelines, remuneration	5.1 Develop a suite of models where Youth Peer Workers may work (e.g., local council setting, mental health services, CAMHS). Includes scope of practice and remuneration guidelines	Youth Access Project Officer	Short-term (to end-2023)	
		5.2 Work with interested organisations to support funding and grant opportunities that implement a Youth Peer Work model	Youth Access Project Officer	Ongoing/long- term (to mid- 2025)
and future	development	6.1 Work with UTAS and organisations to support accreditation pathways into other allied health roles (e.g., Social Work, Psychology)	Youth Access Project Officer	Long-term (to mid-2025)
		6.2 Work with agencies to incentivise training and education opportunities for Youth Peer Work	MHCT/Primary Health Tasmania/Department of Health working group	Ongoing/ long-term (to mid-2025)

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Implementation Priorities and Timeframes

The *Youth Implementation Plan* is divided into five key phases, with a review to occur in July 2024 to consider priorities and direction based on evaluation, monitoring of progress, key learnings and the policy environment. The review of the Youth Implementation Plan will be guided by the youth co-design group and approved by the steering committee comprised of the high-level stakeholders identified on page 9.

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Implementation Phases Breakdown

Phase 1 – Research – Completed May 2023

Phase 2 – Opportunities

Phase 3 – Preparation

Phase 4 – Training

Phase 5 – Building

Priority 1 – Research

Timeframe for Completion – July 2022 – May 2023 (completed)

Activities	Timeframes
Research and produce literature review on Youth Peer Work theories, studies and current programs	July 2022 – August 2022
Connect with high-level stakeholders to conduct preliminary discussions about a Youth Peer Work project	August 2022
Develop consultation plan for key stakeholder groups	August 2022 – October 2022
Conduct consultations with young people across forums and small focus groups	November 2022 – February 2023
Produce and distribute survey to deliver to service providers via Youth MH Networks	January 2023 – February 2023
Collate information into a Youth Peer Work Model document	April 2023
Consult with SANE on proposed SANE Peer Guide Program and find opportunities for collaboration	August 2022 – December 2022
Produce and deliver Youth Peer Work Implementation Plan	April 2023 – May 2023

The aim for the first phase of the Youth Implementation Plan was to gain a sound understanding of where gaps exist in the delivery of youth mental health services in Tasmania and what can be learned from other Australian jurisdictions. Whilst some of the issues experienced in the existing peer workforce will likely also impact Youth Peer Workers, there were unique factors impacting young people and affecting their experiences with mental health services. It was important that the research undertaken capture as many perspectives as possible to ensure that the following phases of the implementation reach optimum efficiency.

Activity: Literature Review - summary of national and international Youth Peer Work models

In August 2022, MHCT produced a scoping report on the background theory, empirical studies of youth peer work and existing youth peer support programs. This was undertaken with the goal of understanding the current landscape of youth peer work programs and thus inform the upcoming consultations with young people and service providers. There has been a notable increase in the number of youth peer support studies throughout COVID-19, likely related to the number of young people taking up the available peer support services during the pandemic.

The youth peer work programs available across Australia and internationally take a variety of different approaches and operate across different platforms. Whilst all have varying approaches, it is useful to look at the common themes that will inform this model.

A number of programs are available online, with group and individual peer support sessions operating via video-conferencing platforms. These programs offer a convenient, cost-effective way for young people to access lived experience peer support from home, a particularly relevant consideration for young Tasmanians living in rural and remote areas without the means to travel to suburban areas. Those not operating online are mostly situated within youth mental health inpatient facilities or youth community settings.

Some of the programs available offer one-on-one peer support, some offer group sessions, and others offer both. Most services operate on a fixed time/session basis, offering weekly/fortnightly sessions for a number of weeks or months.

While it is evident that these programs offer a variety of different support options, settings, and functions, the common thread that connects them is their desire to offer flexibility and to accommodate as many young people as possible.

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Activity: Stakeholder Engagement & Coordination Plan

A consultation plan was developed in August 2022 to effectively consult with key stakeholders to develop an understanding of the core elements in a Youth Peer Work Model. The key groups of stakeholders relevant to this project were categorised as follows:

- > Young people with lived experience of mental illness and the Tasmanian mental health care sector
- > Young people with an interest in mental health promotion and prevention
- Carers of young people with lived experience of mental illness and the Tasmanian mental health care sector
- > Youth mental health services and other services with a high level of engagement with young people/interest in youth mental health

Consultations were designed and modified based on the needs of the specific group being consulted. For young people, this took the form of workshop activities used for youth forums and informal group discussions. The key objectives established for these consultations were:

- ▶ Definition of Youth Peer Work/Worker
- Principles that underpin the proposed model
- Skills and Traits of Youth Peer Workers
- ▷ Settings for the employment of Youth Peer Workers

- > Pathways for future education and employment

For service providers, initial conversations were held with high-level stakeholders who had previously expressed interest in the Youth Peer Work project. These conversations were designed to understand the key priorities and concerns for the development of a youth specific peer work project. Further consultations then took place during the regional working group meetings held bi-monthly. Informal discussions occurred during the meetings, and the participants were emailed a survey to complete. Consultations will continue throughout the implementation of the Youth Peer Work project.

Activity: Consultations and Mapping

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Co-design Background

The co-design process for this youth peer work project was founded on principles that were identified in the <u>National Children's Mental Health and Wellbeing Strategy 2021</u>. The principles of equal partnership, designing together, openness, respect and empathy were used to inform the various forms of consultation that were conducted throughout late 2022 and early 2023.

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These consultations were then brought to a co-design team comprised of young people and carers with lived experience of mental health challenges to collate the qualitative data, establish common themes and design a set of guidelines for implementation. This data provides valuable insight into the challenges and successes experienced by those with direct experience of the mental health sector in Tasmania. These consultations also captured ideas and opportunities for improving the experience of mental health services for young people.

A key priority for these consultations was to reach out across Tasmania to hear from as many young people as possible, being aware that young people in rural and remote areas are often unable to participate in consultations or are unaware of their existence due to living far from urban city centres where consultations are often hosted. Consultations were delivered in multiple modalities: in-person with small focus groups, at youth forums, online discussions and via an online survey for those whom in-person consultations were not suitable.

Across these methods, approximately 55 young people were able to contribute to the development of this Youth Peer Work model. Approximately 40 of these young people were engaged through consultations, with young people from the North West region, Launceston and surrounds, the Huon Valley, northern Hobart suburbs and Cape Barren Island participating. 15 young people completed the survey, who were mostly located in the North and North-West regions of Tasmania.

The other key part of the co-design was to engage with those providing youth mental health services across Tasmania. The experience of accessing mental health services across Tasmania is

diverse and affected by numerous factors related to funding, staffing and youth needs. Regional Youth Mental Health Networks have been established across the three regions (North, North-West, South). These groups were surveyed to learn about what resources, training and supervision requirements are necessary to be able to employ Youth Peer Workers within their organisations. Those surveyed included funding bodies, clinical mental health providers and multi-disciplinary youth services.

Consultations with young people: November 2022 – February 2023

Definition of a Youth Peer Worker

It was evident from the consultations that young people had strong preferences around the wording and labelling of the Youth Peer Workers. The consultations evoked discussions around previous referrals from clinicians to support workers who often followed a clinical approach rather than the more informal peer modelling the young person expected. As such, discussions about the definition for this new type of worker were primarily focused on being recognised as non-clinical and relatable.

The discussion was broken down into the definition of 'youth' 'peer' and 'worker' and brought about varying opinions on each, but the consistent themes emerged as follows:

- 'Peer' there was a lot of lively discussion around the use of 'peer' or 'lived experience' with different perceptions across the consultations. Some felt that 'lived experience' would not accurately advertise the worker as someone of a similar age which the young people identified as the crucial aspect of this new role, with 'peer' the more popular choice
- 'Worker' this word had positive and negative connotations, with 'worker' promoting role validity and professionalism, whilst 'support person' was more encouraging of a peer-to-peer relationship rather than the typical power imbalance often experienced by young people and clinical workers. Whilst neither was a perfect fit, the general consensus was that 'worker' was the most appropriate word for this position title.

Principles of Youth Peer Work

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The principles offered by young people in the consultation were broad ranging. Trust, respect, shared understanding, positive modelling and recovery-focused were popular and consistent with existing peer work programs.

Settings for Youth Peer Work

A clear consensus for the setting was evident across the survey and the consultation, with young people advocating for Youth Peer Workers to be based in community settings such as council buildings, YouthARC and SevenUp centres. These settings were preferred as they are a neutral space, accessible to most people and offer other services that may be complimentary to the Youth Peer Work (and offer a level of privacy).

Another popular option was to have Youth Peer Workers available in schools, though this did raise some concerns around how it would be implemented and how students could maintain privacy and confidentiality.

A lot of discussion was focused on the physical space that the Youth Peer Workers will operate in. There were many ideas on how to make the space welcoming, safe, inclusive and comfortable, including having music playing, fidget toys available, comfortable chairs/bean bags, board games and the ability to move around/outside of the space.

Skills and traits of Youth Peer Workers

A topic which promoted meaningful conversation surrounded the skills and traits of a Youth Peer Worker. The discussion captured both desirable and undesirable skills and traits.

Among other more common traits, young people feel that peer workers should be relatable, willing to learn, realistic, comfortable in their recovery journey, informed and transparent. Young people also expect that peer workers will not be discriminatory, clinical, dismissive, try-hard or 'gaslighting' (manipulating someone into questioning their decisions, actions or beliefs).

Support options offered by Youth Peer Workers

Most of the focus in the consultations centred around individual Youth Peer Work which is indicative of the primary interest of YPW being one-on-one support. Within this one-on-one support, young people expressed interest in having peer workers that were informed and could support them around the following topics:

- Navigating services
- > Transitioning between services
- > Support to make phone calls for appointments
- ▷ Attending the first appointment with them

There was some interest in having group sessions, particularly with a group of friends or in a 'bring a friend' style setting to try out a Youth Peer Work program if they aren't sure if it is the right fit for them. However, there was a lack of interest in group sessions which may possibly relate to the issue of confidentiality/privacy in Tasmania.

Consultations with service providers: January – February 2023

Service providers from the established Youth Mental Health Networks were asked to complete a survey about a potential Youth Peer Work project in Tasmania. 13 provider representatives completed the survey and the following themes emerged.

Interest in employing Youth Peer Workers

The majority of responses currently or had previously engaged Youth Peer Workers or were interested in engaging Youth Peer Workers in their service.

Service providers identified a number of benefits that Youth Peer Workers could bring to their organisations, including:

- > Stronger engagement with young people
- ▷ Offer young people a level of safety

- Non-clinical accompaniment and skills groups
- A better voice for lived experience
- ▶ More frequent engagement with young people than clinicians

Implementation of Youth Peer Workers

It is evident from the survey that work needs to be done to effectively implement Youth Peer Workers. Service providers are committed to establishing a program that has longevity and provides the necessary protections for Youth Peer Workers. The most important requirements for the project reported were governance and advocacy, peer connections, organisational readiness, and training and professional development. Workforce development and career progression were also noted.

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The supports necessary to ensure successful implementation were wide-ranging with responses including:

- ▷ Self-care knowledge and plans available

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- ▷ Professional boundaries knowledge
- Defined scope of practice and training frameworks

- ▷ Ongoing support for the organisations
- Clear policies
- Position descriptions

Developing strong pathways for workforce retention

We asked the service providers how Youth Peer Workers can be encouraged and supported to stay engaged/employed in the mental health care sector, with the overall goal of addressing current workforce retention issues. Broadly, there was a positive response to supporting the next generation of mental health workers. The service providers raised the following ideas for consideration and implementation:

- Adding a portfolio of experience to applications for relevant tertiary studies
- > Professional development
- > Oversight and supervision with regular evaluation
- Support networks
- ▷ Ongoing mentor/leadership support
- Deportunities for further studies and employment
- Remuneration

Supervision and protection of Youth Peer Workers

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The design and delivery of supervision for Youth Peer Workers is likely to be similar to the supervision offered to the existing peer/lived experience workforce, however the frequency of supervision and ongoing support was noted as needing to be greater for young people to ensure that their mental wellbeing at a formative time in their lives is sufficiently protected to avoid retraumatisation. Suggestions included:

- ▶ Regular ongoing professional supervision that includes shadowing
- ▷ Offering productive feedback and space for reflection
- External group supervision

Professional development for Youth Peer Workers

A major aspect of the responses received regarding the retention of Youth Peer Workers was the opportunity to offer them professional development opportunities. The training and support offered will also ensure that the Youth Peer Workers are able to operate within their employed organisation safely and effectively.

Professional development opportunities suggested included:

- ▶ Basic counselling skills and motivational interviewing
- Professional development regarding boundaries
- Managing vicarious trauma
- ▷ Self-care training
- Mental Health First Aid
- ▷ Certificate 4 in Peer Work
- Network and practice approach training
- CORES training
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- NDIS training
- Deportunities for traineeships/cadetships, support workers, youth/community services
- Mandatory reporting requirements
- Privacy and boundaries

Throughout the research phase of the Youth Implementation Plan, it became evident that young people and service providers agree that there is a valuable role for Youth Peer Workers in the Tasmanian youth mental health sector that cannot be adequately filled with the existing workforce. Youth Peer Workers are able to offer support that is accessible, inclusive and, primarily, understanding of the experience of mental health challenges at a young age. Whilst the existing programs across Australia will provide inspiration, the feedback received from young people and service providers will be the primary source of information as the Youth Implementation Plan progresses.

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Priority 2 – Opportunities

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Note: The remaining priorities of the Youth Implementation Plan have been categorised based on their focus in building a sustainable, professional youth peer workforce. The priorities have been allocated an approximate commencement time across the remaining 20 months of this project, but it is understood that these are variable and will be reviewed at the 12-month mark.

With the sound understanding of what young people and service providers need from Youth Peer Work and what can be learned from existing programs in Australia, the next phase of the implementation is to advocate for and develop, different models of Youth Peer Work and employment opportunities.

These actions have been prioritised due to the existing challenges experienced by the Peer/Lived Experience workforce in finding and retaining employment due to funding constraints and lack of knowledge about the scope and benefit of the role. Without sufficient preparation, time, and resources dedicated to advocating for and securing Youth Peer Worker roles in various settings, the likely result would be having young people who are trained and passionate about their proposed role who are then unable to gain employment and may become disengaged with the sector. The following approach aims to ensure that these challenges are not repeated and an effective and supportive youth peer workforce is implemented in Tasmania.

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Timeframe for Commencement - June 2023

Activities

Development of a suite of YPW models in different settings and promotion of these models

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Linking with Lived Experienced Workforce Awareness Campaign to identify opportunities to promote YPWs

Work with organisations and young people to promote opportunities for YPWs including identifying resources to support ongoing engagement

Establishing networks with broader stakeholders and young people to support the governance structure

Review SANE Peer Guide program and build network of Tasmanian participants

Priority 3 – Preparation

The next priority of the Youth Implementation Plan is to prepare interested youth services to onboard Youth Peer Workers. What has been evident from the implementation of a Peer/Lived Experience Workforce is that peer workers cannot be introduced to the sector with the same onboarding and management as 'traditional' employees. Typical employment instruments like position descriptions, key performance indicators and supervision will need to be reviewed and re-modelled to be most effective for Youth Peer Workers.

Timeframe for Commencement – January 2024

Activities

Work with LEW Coordinator to review NMHC guidelines and create an organisational readiness program

Review LEW survey and add questions to gain understanding of YPW in Tasmania

Work with LEW Coordinator to consider workers compensation, and insurances that may impact of employment

Develop a presentation on the benefits of YPWs for organisations where YPW may be employed

Work with organisations to develop guidelines for YPWs

Develop best practice guidelines for supporting YPWs in workplaces

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Priority 4 – Training and Qualification Pathways

The penultimate phase of this Youth Implementation Plan is to ensure that Youth Peer Workers receive the level of training that service providers have determined to be essential for their employment as professionals within their organisations, including training and ongoing supervision and support to ensure the physical and psychosocial safety of Youth Peer Workers.

Timeframe for Commencement – January 2024

Activities

Identify/develop best practice guidelines for supervision of YPW's

Working with RTOs around specialised skillset to accompany a generalised Certificate 4 in Peer Work

Develop a mentorship program with former YPW's

Work with LEW Coordinator to identify traineeship opportunities

Work with LEW Coordinator to adapt the Fundamentals of Peer Work training course to includes youth experiences

Identify work experience opportunities with the regional YMH networks

Priority 5 – Building

The remainder of the project timeframe will focus on building the Youth Peer Workforce and expanding the education and workforce pathways for young people. The goal will be to incentivise Youth Peer Workers to stay employed in the mental health sector to address sectorwide staffing issues and/or to encourage further education into studies such as nursing, social work and psychology.

Timeframe for Commencement – June 2024

Activities

Work with UTAS and other organisations to support accreditation pathways into other allied health roles

Work with agencies to incentivise training and education opportunities for YPW

Continue to discuss YPW with regional youth mental health networks

Provide ongoing support to employing organisations as required

Evaluation

As identified at the beginning of the Youth Implementation Plan, consistent review and evaluation is an important component of this project. The first review will be undertaken in July 2024. The review will evaluate the activities completed to date and if necessary, revise the activities due for completion in the final 12 months of the project. The reviews will be guided by MHCT, the youth co-design group and the steering committee.