

Integration, Access and Investment

2019–2020 Budget Priority Submission Mental Health Council of Tasmania AUTHORISED BY:

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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.

MHCT has consulted with our sector and developed a Budget Priority Submission to address the level of urgent concerns about universal and ongoing pressures and gaps that exist within Tasmania's mental health sector. The breadth of system gaps, access issues and siloed service delivery is directly and significantly impacting on the State's ability to deliver an integrated, consumer-focused mental health service for Tasmanians and to reach goals set out in the 'Rethink Mental Health' plan.

Identified gaps and pressures include:

- A 12-month funding cycle that significantly restricts the ability of community managed mental health services 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 stop, and be replaced by a model that provides surety, stability and allow for more effective financial program planning and delivery, whilst supporting workforce creation and retention. Previously, service agreements were 3 years contracts providing stability, viability and the security to effectively forward plan. Significant concerns have been expressed by many service providers, some in their second year of 12-month service agreements, who are advising their programs, planning and delivery are at great risk, including reports of loss of staff members due to lack of security around ongoing employment.
- A distinct lack of clarity and confidence in the process of transition to the National Disability Insurance Scheme (NDIS) in the state, and the role and responsibility of State Government whilst acknowledging the nuances in jurisdictional responsibilities between the Commonwealth and States around the transition. The Tasmanian Government are required to deliver ongoing and innovative education and support to ensure the sector's capacity and capability going forward, to ensure no Tasmanian is worse off following the transition.
- A lack of significant investment in resourcing and support to drive an integration model for the mental health sector that brings consumers, carers, workers and organisations along collectively towards integration.
- The critical need for a centralised support phone service for individuals and families requiring support to
 navigate and access Tasmania's mental health system, co-designed and co-delivered by mental health
 professionals from both clinical and community-managed mental health services. The service will ensure
 Tasmanians can access support earlier and at different points as required. A centralised service will significantly
 reduce pressures and presentations within our hospital and acute health system, diverting people towards
 earlier supports and interventions, and away from Emergency Departments when they are at the point of crisis.
- The need for a renewed commitment to ongoing, year-round engagement and promotion to raise awareness and reduce stigma around mental health and suicide prevention, by formally engaging Tasmanians in Mental Health Week and the support of awareness and promotional campaigns.

In response to these and other concerns, and taking into account both the stated goals of the 'Rethink Mental Health' plan, the Fifth National Mental Health and Suicide Prevention Plan and MHCT's previous Budget Priority Submissions, please find three initiatives for consideration as outlined below:



Rethink Mental Health Integration Fund

In our previous Budget Priority Submission 2018-2019, MHCT requested the establishment of a fund to support learning and development for the mental health sector. A year on, the need for this dedicated, transitional support is even greater.

In response, MHCT has broadened the remit of this Fund, and is requesting the establishment of the **Rethink Mental Health Integration Fund (RMHIF)** – essentially a transition Fund to support transformation: ongoing learning, development and integrated practice for the community-managed mental health sector, and those who access the sector. There remains no current mechanism in place to support this important work within the mental health system. An urgent need exists and must be met, as issues relating to NDIS transition, the uncertainly experienced by the sector based on short funding cycles and myriad other gaps bring negative impacts on the sector, alongside an increased risk and lack of surety around ongoing support and the ability to respond to the continuing and increasing demand and need for services.

The establishment of the RMHIF and its activities would significantly support, encourage and actively foster communities of practice, boost innovation and collaboration across the spectrum of mental health service delivery in Tasmania, and drive transformation as prioritised in the 'Rethink Mental Health' plan. In addition, the Fund will align with the intent of the Mental Health Integration Taskforce and the anticipated findings of its final report, due in early 2019.

The RMHIF's programs would facilitate and foster sector-wide culture change: within organisations; for consumers, carers and families; and through building workforce capacity by delivering much-needed learning and development to drive integration. Through the identification, development and delivery of collaborative programs, training and initiatives, the RMHIF will also specifically address identified gaps and encourage co-design, co-delivery within our sector. The RMHIF would also be an appropriate conduit to provide solutions that address gaps identified by the Tasmanian Government's Regional Planning process, as stipulated in the Fifth National Mental Health and Suicide Prevention Plan.

The Fund would operate regular grant rounds, and would be managed independently, with the State Government providing core funding but developed structurally to allow other stakeholders to contribute funds to supplement Grant rounds and support opportunities. Grant rounds would target and support education, development and an integrated approach to transformation, and focus on delivering formal learning and educational opportunities for the sector. In addition, the Fund would have a mechanism to respond proactively to identified issues of importance, scoping and mapping the sector and where capacity building would be required to support continued momentum towards an integrated mental health system.

Grant rounds would focus on identified issues and target audiences, for example:

- Consumers and Carers: support, upskilling, training and networks
- Mental Health Workforce: support, collaboration, development, capacity building and support for a peer workforce



- Suicide prevention: enhancement of existing work and achievements of the National Suicide Prevention Trial Sites and the Tasmanian Communications Charter: A State-Based Approach to Mental Health and Suicide Prevention
- Improving networking and formal learning opportunities to foster collaboration and an integrative approach
- Scoping work to identify current gaps in learning, knowledge and training

Focus Area

Rethink Mental Health Integration Fund

Rationale

Tasmania needs a fund to support the transformation of the mental health system – fostering communities of practice, innovation and collaboration across the spectrum of mental health services

Investment Required

\$1.5 million over 3 years, comprising:

- \$400,000 per year, over three years in direct Grant funding for distribution
- \$100,000 per year, over three years, for management/coordination fees

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Centralised Mental Health Access Service

MHCT requests the co-design and development of a *Centralised Mental Health Access Service (CMHAS)* - a comprehensive telephone and online service accessed by the general public, community members and organisations, General Practitioners, primary care providers and other stakeholders - delivering easily accessible and tailored advice, information and referral pathways to all available services (public, private and community-based), anywhere, and at any time.

The CMHAS will address known concerns expressed by various stakeholders including community members about the need for a centralised service providing advice and navigation around available supports and referral pathways preventatively, to support mental health literacy and access. CMHAS will enable people to understand and access clinical or non-clinical support options at the right time, and in many cases, before an individual becomes acutely unwell and requires hospitalisation or another form of acute care. The model will provide an important and ongoing central point for crisis response management and referral and will be able to divert individuals and their families towards a range of supports and interventions, leading to less presentations in hospital Emergency Departments.

The success of the CMHAS model would rely on a partnership of community-managed mental health service navigators working alongside clinical staff, co-located and co-delivering the service and its resources, including the triaging of both crisis/acute needs towards clinical supports and non-acute cases supported with the provision of community-managed mental health support referral options, service navigation and advice.

The CMHAS model would incorporate the current Mental Health Services Helpline and expand on its functions to include community-based preventative and early intervention supports as outlined above - referral pathways to nominated services in various locations, support and advice around service navigation, referrals to consumer and carer-established networks and advice for non-clinical cases. The CMHAS would include both a phone service offering direct and personalised access, and a website option with supporting resources. By adopting an integrated approach, the CMHAS will provide the full suite of supports – from crisis/acute care management to service advice, navigation and referral.

CMHAS will also provide an unprecedented opportunity to collect, analyse and learn from a wealth of data, to be captured centrally for the first time, establishing a baseline of statistics which will inform future needs and identify gaps to support further mental health system integration.

The co-design and delivery of the CMHAS will require strong and sustained partnerships, working collaboratively during the 12-month co-design phase to develop an implementation plan for service delivery and to determine an implementation budget. The Co-design phase will require the establishment of an Advisory Group to inform the development process, with stakeholders including:

- MHCT and the community-managed mental health sector
- the Tasmanian Health Service (THS)
- Primary Health Tasmania (PHT)



- Mental Health, Alcohol, and other Drug Directorate (MHADD) within the Department of Health
- Mental health carer and consumer groups
- Suicide prevention organisations and advocacy group

Once operational, the CMHAS model would also lend itself to an expansion of the service, with the potential to develop mental health shopfront/s, based in the community - again enhancing and building understanding, early intervention and support opportunities for Tasmanians.

Successful, centralised service models have already been developed in our state and will come online by December 2018. The *Strong Kids Safe Families Advice and Referral Service* child protection service will provide a new, single state-wide service that brings Public Health and Community-managed mental health professionals together to deliver a one call-queue and a staged referral process, thus removing barriers a fragmentation with the delivery of a state-wide model. The *Strong Kids Safe Families Advice and Referral Service* model is a centralised contact point for people seeking information, advice and assistance relating to the welfare and protection of a child or their family. The development of the CMHAS service could draw on the synergies of the *Strong Kids Safe Families Advice and Referral Service* model in the provision of a one-stop, centralised, state-wide mental health service and would mirror the approach – providing clinical and non-clinical mental health options, support and service navigation for Tasmanians and their communities.

Focus Area

Centralised Mental Health Access Service (CMHAS)

Rationale

Tasmania needs a centralised crisis response management and mental health referral service to divert individuals and their families towards supports and interventions earlier, to alleviate pressure on hospitals and acute care settings

Investment Required

Co-design Phase (12 months)

*\$200,000 incorporating Advisory Group establishment, consultation, project co-design and development



Mental Health Week campaign and continued increase in MHW Small Grants Funding

Following on from the success of the 2018 Mental Health Week (MHW) in Tasmania, MHCT requests the continuation of an increase in funding to support the MHW Small Grants program (which increased from \$20,000 to \$40,000 in 2018) and an expanded approach to MHCT's current work in Promotion, Prevention and Early Intervention (PPEI) and 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, the 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 can achieve even greater success. The expansion is outlined below - building a stronger, more consistent and impactful campaign and program of activities promoting mental health, wellbeing and stigma reduction in Tasmania.

MHCT proposes:

- continuation of the committed funding in the Small Grants program (increased to \$40,000 in 2018)
- establishing a Mental Health Week awards program and event for our state
- continuation of the Youth Arts Prize, managed by MHCT, after the success of year one in 2018
- continuation of support for the coordination of Mental Health Week
- 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.

Focus Area

MHW Campaign and confirmed ongoing increase in Small Grants Funding

Rationale

Tasmania needs an effective, year-round campaign focused on mental health and wellbeing Promotion, Prevention and Early Intervention (PPEI) principles, culminating in Mental Health Week each October

Investment Required

\$90,000 annual investment, comprising:

\$20,000 MHW Annual Small Grants program increase (there is already an ongoing commitment for \$20,000)

\$35,000 MHW awards program and event

\$20,000 MHW Youth Arts Prize

\$15,000 Year-long PPEI campaign

