

# At A Glance – Blueprint for Action on Mental Health

Mental health in Australia has not suffered for want of reviews.

Time and time again governments and reviewers have looked at mental health and have identified our ongoing failure to deliver care to people when they need it most. To support the National Mental Health Commission's Review of Mental Health Services and Programmes, Mental Health Australia has worked with its extensive membership of 132 organisations to identify key directions and priorities for mental health reform.

We have consulted deeply with representatives of consumers and carers, professional groups, community mental health providers, researchers, educators and many more.

Those voices are brought together into our Blueprint for Action on Mental Health.

While this Blueprint lays out some very clear directions for government, if we are to avoid the failings and disappointed hopes of previous reviews this must be just the beginning of a decadelong reform process.

We point to some critical first steps, but we need commitment by government to the whole journey.

Any review will layout directions, but real change requires goals, actions, timelines, resources and accountability.

Mental Health Australia and its membership stand ready to embrace reform, and to assist in the change required to achieve it.

Jennifer Westacott

Chair, Mental Health Australia

of bless.

Mental Health Australia is the Commonwealth recognised peak, non-government organisation representing and promoting the interests of the Australian mental health sector. Representing the full spectrum of mental health stakeholders and issues, Mental Health Australia's members include national organisations representing consumers, carers, special needs groups, clinical service providers, public and private mental health service providers, researchers and state/territory community mental health peak bodies.

## Seven Point Plan

- 1. Agree on what we want to achieve
- 2. Be clear on who is responsible for what
- 3. Increase consumer and carer participation and choice
- 4. Match services to need

- Get the incentives right to drive better outcomes
- 6. Invest at the right time to achieve the greatest benefit
- 7. Keep governments and services accountable

## Safeguarding good practice

Right now, thousands of professionals are helping people to recover from their mental illness and reduce its impact on their lives. We must retain and build on their expertise and dedication.

We must also acknowledge the huge amount of good work to build system capacity through training, linking people, coordinating services and overcoming policy and implementation barriers. This work must continue during transition, and be recognised and supported though any new arrangements.

The Government must be mindful of the possible unintended consequences of policy changes in disability, housing, welfare and other areas for mental health – and vice versa.

In considering any actions in response to the Review's findings, the Government should be guided by the following principles:

- No net reduction in investment in mental health
- Retain any existing arrangements which make a positive contribution to mental health outcomes
- Dismantle any existing arrangements which undermine mental health outcomes
- Where evidence is lacking about the contribution of existing arrangements to mental health outcomes, government should proceed with caution
- Where the Commonwealth intends to remove funding for existing programs, it should only do so after developing strategies to retain and use any infrastructure, human capital and intellectual property developed through those programs
- Regardless of whether funding continues for any particular program, government should provide certainty to community-managed organisations about their long-term future funding to assist with workforce planning and retention of existing staff
- Any service gaps likely to emerge through the discontinuation of services should be identified and communicated to those affected, including state/territory governments and service providers.



## Priority recommendations

- Adopt long-term targets for improving mental health outcomes across the full spectrum of need
- Establish a new National Mental Health Agreement defining roles and responsibilities for governments and the non-government sector
- Increase mental health consumer and carer representation and leadership •
- \* Build a trained professional mental health peer workforce
- \* Support people with psychosocial disability through the NDIS, while protecting good practice during transition
- Develop a clearer picture of community mental health services and identify likely future gaps in services
- Invest in e-Mental Health practices that are evidence-based, scalable and value for money
- Conduct a national audit of all housing and accommodation for people with severe mental illness
- Ensure that income support payments for mental health consumers and carers adequately meet the costs of living, including the costs of economic and social participation and the costs of care and treatment
- Ensure that contracts with community-managed organisations reward better outcomes and avoid needless red tape
- Quantify the optimal levels of investment required to improve long-term mental • health outcomes
- Shift the balance of investments 'upstream' towards prevention and early intervention to reduce costs 'downstream' costs in acute care and crisis management
- Coordinate a national evidence-based prevention, early intervention and antidiscrimination campaign

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Establish an independent mechanism for evaluating and reporting on all government investments in mental health



## Our influence

#### State & Territory NGOs

NGO community 800 mental health service providers

Peak bodies

#### **Consumers & Carers**



- National MH Consumer and Carer Forum
- National Register of Consumers and Carers
- National Carer organisations
- National Consumer organisations

#### Research



- Universities
- Private research institutions
- National Centres of Excellence

#### **Professional Bodies**



- **GPs**
- Nurses
- **Psychologists**
- **Psychiatrists**
- Pharmacists
- Social Workers

#### **Cross-Sector Relationships**



- Disability
- **Employment**
- Housing
- Welfare

#### **Key Groups**



- **ATSI**
- CaLD
- LGBTI Rural

#### **Service Providers**



- National helplines
- Youth
- e-Mental Health
- Private services
- **Employment agencies**
- National charities

## Mental Health Australia

ALIA House 1st Floor 9-11 Napier Close Deakin ACT 2600

P 02 6285 3100 F 02 6285 2166 E info@mhaustralia.org

### Information & Advice for Government

- Policy submissions
- Policy advice
- Committee representation
- Relationship brokering



## Mental Health Australia



Mentally healthy people, mentally healthy communities