



Partnering for Change

Towards a new community model for mental health

Symposium summary

October 2021

Partnering for Change

This is a momentous year for mental health and wellbeing, particularly for the state of Victoria. In its final report, the Royal Commission into Victoria's Mental Health System outlined a vision for a new reformed system with lived experience and community-based mental healthcare at its heart. As we begin to implement the reforms, it is vital we understand the fundamentals of the delivery and design of the new community mental health model.

As the peak body for mental health in Victoria, Mental Health Victoria (MHV) recently hosted a two-day symposium to help the sector through this historic time. Held on 7 and 14 September, 'Partnering for Change: Towards a new community model for mental health' brought together over 200 consumers, carers, families, friends and supporters, service providers, peak and professional bodies and government representatives. Attendees heard from sector leaders and people with lived experience, they shared knowledge and explored what the new community-based model of care could look like in Victoria.

As the Royal Commission's recommendations start to take shape, effective partnerships for delivery of new community services will be necessary. This summary features the key messages from speakers and panellists across the symposium and provides copies of the slideshows from selected sessions.

MHV Symposium Series

'Partnering for Change' was the third event in MHV's series of symposiums focused on the reform of the mental health system. MHV's first 2021 symposium looked at the details of the Final Report from the Royal Commission as well as other historic inquiries, reports and strategies from across the country. Our second event explored ways to put the Royal Commission's recommendations into practice through implementation, co-production and culture change. Information about our previous events can be found on our [Conference website](#).

Our final event for the year will take place in November and will focus on learning from adversity – what have we learnt from the past 18 months in Victoria and how can we ensure that we have a future mental health system that can adapt and respond to critical events. More information will be available soon via our [Conference website](#).

Creating genuine partnerships

Authentic and lasting partnerships between all stakeholders in the sector, including with people with lived experience, will underpin reform outcomes and effective service response in the new mental health system. Our first panel of the symposium brought together community and clinical mental health service providers to discuss practical tips and insights for the delivery of services through genuine partnership models.

Speakers identified several features of genuine partnerships in the effective delivery of services, including:

- being adaptive and responsive to changing needs
- going outside predetermined partnerships by building innovative and new partnerships, such as with competitors
- setting aside power imbalances and empowering lived experience voices
- understanding the impact of inequities and culture as a barrier
- bringing partnerships into the process early and re-establishing old partnerships
- fostering both informal and formal partnerships
- building on collective knowledge and experience
- adopting leadership which values the strengths that all bring to the table
- being upfront with values, agreements and principles of a partnership
- creating spaces that promote trust, honesty and respect.

Integrating across domains

An integrated service system will be a core part of how the new community mental health model will function. The new service system will consist of six integrated levels of care which will require service providers to engage together to ensure that a continuum of supports and services will be available to meet whole-of-person needs.

Leaders from intersecting sectors discussed the barriers and enablers of integration for the new community model of mental health, and identified important tools that can assist community services to integrate with other sectors such as:

- ongoing funding structures that are allocated to all sectors who are involved in the mental health and wellbeing system
- integrated collaborative networks that are promoted as core business
- training and upskilling opportunities for intersecting workforces in mental health
- ensuring a whole-of-person perspective is at the forefront of services
- a shift in current sector/workforce silos and eligibility criteria for services
- accessible navigation and robust partnerships that facilitate integration
- guarantee of a genuine 'no wrong door' approach across all services
- slowing the reform agenda to make sure integration is genuinely occurring
- moving away from categorisation and the dichotomy between physical and mental health towards a holistic wellbeing model.

Staffing community services

A well-functioning mental health workforce will be critical to the delivery of services that support the care and treatment of people living with mental health issues. To facilitate this, we need to consider how staff across the system are supported, developed, trained and transitioned into the new community mental health model.

During the symposium, panellists from professional associations discussed the needs, hopes and challenges in developing a workforce to deliver services in the new model. A range of supports and competencies were noted including:

- lived experience at the core of training
- ongoing support for peer workforces
- evidence-based treatments that are trauma-informed and data-driven
- identification of workforce competencies and increased core competencies in mental health for intersecting workforces
- expanded training positions and placement opportunities
- workforce retention and support strategies which respect and value workers
- classification of scope of practice/role clarity to ensure people can work to the full scope of their practice
- creation of an environment where people connect and access all wellbeing options in one place
- multidisciplinary teams that work together and can facilitate holistic assessments of consumers
- adequate remuneration and career pathways for all professions
- acknowledgement of the social determinants of health when providing services.

Embedding safety and inclusivity

The new mental health system will need to recognise and respond to diversity to provide safe and high-quality mental healthcare based on fair access, respect and inclusion for all people. To achieve this, community services will need to be responsive to people and populations on a localised level and adapt to changing inequities.

During our second day of the symposium, peak body leaders identified key aspects and tools that are needed to strengthen cultural safety and inclusivity in the new community-based model, including:

- safe, welcoming and inclusive structures and policies
- research, data, evaluation and minimum standards for service delivery across communities
- diversity of service models and types that are also culturally responsive
- mainstream services and specialist services working side by side
- acknowledgment of the ongoing impact of history, colonialism and racism in service access
- representation across workforces at every level of the system
- recognition of kinship in wellbeing, cultural safety and strengths of Aboriginal and Torres Strait Islander communities
- appropriate training and knowledge to provide inclusive care
- identification of social risk factors for certain population groups but not just focusing on a deficit model
- a clear understanding of the needs of the population the service is trying to reach.

Providing crisis supports

Due to existing constraints and pressures, the mental health system has tended to rely on crisis response. The Royal Commission proposed that services be redesigned, moving from a crisis-driven model to a community-based one. Even so, crisis response remains an important feature and will continue to be expanded in the new system, with 24-hour telephone services and the coordination of crisis and follow-up care through new Area Mental Health and Wellbeing Services.

Our panel on crisis supports brought together experts to discuss ideas on how the new community model could respond to people in crisis. They noted some of the biggest enablers to effective crisis response, such as:

- clear linkages and pathways of care in the system to foster navigation for consumers, carers and service providers
- compassionate responses which overcome stigma
- training people in empathy and trauma-informed responses
- investment in peer workers and lived experience
- use of crisis response models that are working well and sustainably funding them, including the PACER pilot co-response model
- identifying linkages to the criminal justice system and other systems that could assist in entry-level care.

Orienting towards recovery

The symposium identified and explored the essential foundations for a comprehensive, inclusive and integrated new model of community care. We heard from several key speakers on existing models of care that could be drawn upon and delved into the various enablers and barriers to service delivery and design in these new community services. Sector leaders closed the day by recalling conversations across the symposium and noting several key ideas which can help ensure the new community mental health model supports recovery for consumers. These included:

- going beyond a medical model and partnering with people with lived experience
- committing to co-design that is genuine
- ensuring all partnerships are equal, and are created before the design process begins
- building reform together with a range of services at the table reflecting the diversity of the community
- taking the time to collaborate and create an authentic community wellbeing approach that benefits all
- recruiting for compassion and embedding values and culture that are oriented towards recovery
- creating services as quickly as possible but also getting it right and taking a 'continual improvement' approach
- encouraging opportunities and spaces for people to feel understood and supported
- focusing on social determinants and centring the community to create a holistic wellbeing approach
- fostering an 'unconditional positive regard' approach to care.

Program and slide shows

Day One, 7 September 2021

9.00am | Welcome and Acknowledgement of Country

Angus Clelland — CEO Mental Health Victoria

Sophie Scott — MC, National Medical Reporter ABC

9:10am | Welcoming Address

The Hon James Merlino — Minister for Mental Health

9:40am | Keynote Address

Prof Patrick McGorry AO — Executive Director Oxygen, Ambassador Mental Health Victoria

10:10am | Morning tea break

10:25am | Panel: Creating genuine partnerships

- Sandra Keppich-Arnold — Director of Operations Mental and Addiction Health, Alfred Health
- Damian Ferrie — CEO Star Health
- Gill Callister PSM — CEO MIND
- Chris Vanstone — Chief Innovation Officer, TACSI
- Deb Carlon — Lived Experience Supervision Project Lead Centre for Mental Health Learning Victoria

11:10am | Showcase series: Incorporating lived experience

- Dr Louise Byrne — Vice-Chancellor's Senior Research Fellow RMIT, [Slide show](#)
- David Butt — NCEO GROW, [Slide show](#)

11:40am | Lunch break

12:25pm | Panel: Integrating across domains

- Sarah Fordyce — State Manager National Disability Service
- Chris Hynan — Manager Victorian Dual Diagnosis Initiative

- Jenny Smith — CEO Council to Homeless Persons
- Dr Karen Price — President Royal Australian College of General Practitioners

1:10pm | Showcase series: Integrated models of care

- Patrick Lawrence — CEO First Step, [Slide show](#)
- Jocelyn Bignold OAM — CEO McAuley Community Services for Women, [Slide show](#)
- Charlotte Jones — General Manager Mental Health Legal Centre, [Slide show](#)
- Clare Groves — Managing Director Clarity Healthcare
- Caroline Crosse AM — Director Innovation Mental Health and Employment WISE Employment, [Slide show](#)

2:25pm | Afternoon tea break

2:40pm | Panel: Staffing community services

- Dr Kerryn Rubin — Deputy Chair Royal Australian and New Zealand College of Psychiatrists, VicBranch
- Zena Burgess — CEO Australian Psychological Society
- Jade Chandler — Mental Health Nursing Officer Australian Nursing and Midwifery Federation, Victorian Branch
- Cindy Smith — CEO Australian Association of Social Workers
- Lyn English AM — Mental Health Consumer Advocate and Consultant

3:25pm | Fireside chat: Spotlight on the Aboriginal workforce

Tom Brideson — NSW Mental Health Deputy Commissioner

3:55pm | Close

Day Two, 14 September 2021

9.00am | Welcome and Acknowledgement of Country

Larissa Taylor — Deputy CEO Policy, Advocacy and Communications Mental Health Victoria

Sophie Scott — MC, National Medical Reporter ABC

9:10am | Keynote Address

Craig Wallace — CEO Victorian Mental Illness Awareness Council Inc, [Slide show](#)

9:40am | Reform implementation update

Katherine Whetton — Deputy Secretary for Mental Health Department of Health, [Slide show](#)

10:10am | Morning tea break

10:30am | Panel: Embedding safety and inclusivity

- Jackson Fairchild — Head of Policy and Programs Rainbow Health Victoria
- Mischa Barr — Policy and Health Promotion Manager Women's Health Victoria
- Rashmi Kumar — Executive Officer Ethnic Communities' Council of Victoria
- Sheree Lowe — Executive Director Social and Emotional Wellbeing Centre of Excellence (VACCHO)

11:15am | Fireside chat: Spotlight on intersectionality

Dr Adele Murdolo — Executive Director Multicultural Centre for Women's Health

11:45am | Showcase series: Incorporating lived experience

Belinda Caldwell — CEO Eating Disorders Victoria, [Slide show](#)

Rose Cuff — Executive Director Satellite Foundation, [Slide show](#)

12:15pm | Launch of MHV/La Trobe University research project on recovery orientated practice and the NDIS

- Prof Lisa Brophy — Principal Investigator and Discipline Lead Social Work and Social Policy La Trobe University
- Dr Catherine Brasier — Co-Investigator Post-Doctoral Research Fellow Social Work and Social Policy La Trobe University
- Kieran Halloran — Manager Psychosocial Projects Workforce Development and Learning Mental Health Victoria, [Slide show](#)

12:30pm | Lunch break

1:30pm | Panel: Providing crisis supports

- Wayne Gatt — Secretary Police Association Victoria
- A/Prof Mick Stephenson — CEO Ambulance Victoria
- Tom Dalton — CEO Neami National
- Fran Timmins — Director of Nursing, Mental Health St Vincent's Mental Health

2:15pm | Fireside chat: Spotlight on suicide prevention and response

Simon Pont — Director Quality Systems and Practice Suicide Prevention Australia

2:45pm | Afternoon tea break

3:00pm | Panel: Orienting towards recovery

- Nicole Bartholomeusz — Chief Executive cohealth
- Nikki Wynne — Director of Services Wellways
- Neil Turton Lane — NDIS Manager Victorian Mental Illness Awareness Council
- Marie Piu — CEO Tandem

3:45pm | Closing Address

Sophie Scott — MC, National Medical Reporter ABC