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It's time to invest in ACT community mental health services

MHCC ACT 2020/21 ACT budget priorities

Mental Health Community Coalition ACT

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About MHCC ACT

The Mental Health Community Coalition of the ACT (MHCC ACT) is a membership-based organisation which was established in 2004 as a peak agency. It provides vital advocacy, representational and capacity building roles for the Not for Profit (NFP) community-managed mental health sector in the ACT. This sector covers the range of non-government organisations (NGO) that offer recovery, early intervention, prevention, health promotion and community support services for people with a mental illness.

The MHCC ACT vision is to be the voice for quality mental health services shaped by lived experience. Our purpose is to foster the capacity of ACT community managed mental health services to support people to live a meaningful and dignified life.

Our strategic goals are:

- To support providers to deliver quality, sustainable, recovery-oriented services
- To represent our members and provide advice that is valued and respected
- To showcase the role of community managed services in supporting peoples' recovery
- To ensure MHCC ACT is well governed, ethical and has good employment practices.

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Executive Summary

Canberra's population is growing and so is the call on mental health and wellbeing services. In the 2019/20 ACT budget significant investment was made in the range of government acute clinical mental health services. **In the 2020/21 ACT budget this needs to be matched by a substantial investment in the community managed mental health sector.**

Investment to ensure a strong vibrant community mental health sector offering best practice services by a highly qualified workforce is consistent with ACT government policy. It would facilitate more people being supported in their community and contributing actively to society. The range of services offered by this sector – recovery, early intervention, prevention, health promotion and community support – also reduces the likelihood of people with mental health challenges reaching crisis point, which in turn reduces pressure on the more expensive acute government mental health services, the justice system and housing.

In its concluding remarks to the Productivity Commission Inquiry into the social and economic benefits of improving mental health (April 2019), it is stated that:

“The ACT Government does not believe that a continuation of the existing policy approach, where an improvement in outcomes is inextricably linked to investment in clinical services, is sustainable or evidence based.”¹

Community managed organisations are a vital part of the mental health system. However, many of the changes to the sector over recent years have compromised their capacity to deliver best practice recovery focussed, trauma informed services to Canberrans while at the same time remaining financially viable. They find it difficult to recruit, retain and invest in an appropriately skilled workforce; they have less flexibility to respond to the episodic needs of people with mental illness; proven services have lost funding; block funding was rolled into the NDIS and replaced with an individualised funding model and associated uncertainties; administrative requirements have increased; and more unfunded work is expected than ever before.

In many ways the sector has also become more fragmented with different funding models, contracting frameworks, restrictions, and reporting requirements. Competition between organisations has increased – while some level of competition is important and has always been there between organisations, this sector also requires a significant degree of cooperation and collaboration in order to deliver person focussed holistic services.

While benefits have certainly flowed from the NDIS, there are well documented challenges with its application to psychosocial disability. Many of the issues originate from the fact that prices paid by the NDIS regularly do not reflect the true cost of service delivery. This has led to conditions that increase the likelihood of market failure. Long wait times to access the NDIS, inadequate and inconsistent packages, and a requirement to annually reprove eligibility, contribute to poor outcomes for participants and create stressful and challenging work environments for service providers.

There is a growing number of Canberrans needing support for their mental health who have limited, if any, options of services or supports. There is also a growing gap in services - referred to as the 'missing middle' - between primary and tertiary services. Access barriers contribute to this including a distinction between NDIS participants and people 'deemed'

¹ ACT Government response - Productivity Commission's inquiry into the social and economic benefits of improving mental health (April 2019), p.38

eligible for the NDIS, and those outside the NDIS; age; diagnosis; severity and complexity; defined time limits; waiting times; and cost.

The lack of an entity with a complete up to date picture of the ACT mental health system across the range of government, private and not for profit services and supports, adds further complexity to Canberrans finding the right service, at the right time, in the right place.

This submission is informed by consultation with MHCC ACT Members and stakeholders. It contains a decision making framework and seven priority areas for ACT budget investment into the mental health and wellbeing of Canberrans.

MHCC ACT urges that all 2020/21 ACT Budget decisions made in relation to mental health and wellbeing, have as a major consideration the extent to which they contribute to:

1. A mental health system for everyone
2. A well-integrated system
3. Sustainability and best practice
4. A trusted partnership approach with the non-government sector
5. VALUE for money

Recommendations

RECOMMENDATION 1: Adequate funding to properly implement recommendations and outcomes from existing government initiatives.

RECOMMENDATION 2: Agree to the request for a six month extension to the ACT Recovery College Trial (refer to separate submission)

RECOMMENDATION 3: Invest in a sustainable robust community mental health sector

RECOMMENDATION 4: Invest in a highly skilled and experienced community mental health workforce to meet the full range of mental health needs

RECOMMENDATION 5: Address the unintended consequences from the NDIS for psychosocial disability services in the ACT

RECOMMENDATION 6: Ensure there is a mental health system for everyone

RECOMMENDATION 7: Invest in the economic and social determinants of mental health and wellbeing

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It's time to invest in ACT community mental health services

ACT budget priorities for improving population mental health and wellbeing

Introduction

While the 2019/20 ACT budget provided welcome investment in mental health, it was largely allocated to expanding capacity of government acute, crisis-focused and hospital-based mental health services. While this is an important part of the mental health system, complementary **investment is urgently needed in non-government mental health services which support people to avoid crisis and stay well in their community.**

The ACT's population is growing by 8,000 people a year and is projected to reach 460,000 by 2023². Around one third of Canberrans will need mental health care at some stage in their lives³. Canberra is also the second youngest city in Australia with 32% of the population being under 25⁴. The growing geographic spread of the ACT means that there is a need to decentralise community and medical (including mental health) services. It is vital that the ACT government start planning and investing in infrastructure and services to meet future demand.

It is well established that investing in early intervention, prevention, post hospitalisation and postvention mental health services helps keep people out of hospital and reduces pressures on the mental health budget. Further, with the appropriate supports in place many people living with mental health challenges actively contribute to society, including by paying taxes and expending income.

In its concluding remarks to the Productivity Commission Inquiry into the social and economic benefits of improving mental health (April 2019), it is stated that:

“The ACT Government does not believe that a continuation of the existing policy approach, where an improvement in outcomes is inextricably linked to investment in clinical services, is sustainable or evidence based.

... in terms of mental health care, a funding mechanism that can be interpreted as incentivising clinical activity in acute facilities, is potentially at odds with the goals that should be set in relation to mental health.”⁵

Instead, the ACT Government states that:

“The philosophy of right care, right time and right place should drive all we do.

² [Property Council Of Australia](#), 4 June 2019

³ Shane Rattenbury, MLA, Media Release 3/6/2019

⁴ Australian Bureau of Statistics, 2016 Census data

⁵ ACT Government response - Productivity Commission's inquiry into the social and economic benefits of improving mental health (April 2019), p.38

... the ACT Government is growing a mental health service system that is broader than clinical services ... It seeks to provide a well-integrated support structure that supports people to stay well and have access to the right services at the right time.”⁶

This sentiment was echoed by the Minister for Mental Health, Shane Rattenbury, in his media release following the 2019/20 budget announcement when he stated: *“The ACT Government is investing to deliver better mental health and justice health services in the ACT – ensuring more Canberrans can access the right services where and when they want them”⁷*

The ACT Human Services Blueprint aims for *“all Canberrans have the capability to fully participate in strong, healthy and inclusive communities and are enabled by a cohesive human services system.”⁸*

In representing the views of the ACT community mental health service providers, MHCC ACT speaks for the range of non-government organisations (NGO) that offer recovery, early intervention, prevention, health promotion and community support services for people with a mental illness.

This submission has been informed by consultation with MHCC ACT Members and stakeholders, including a consultation focussing on budget priorities.

In the 2020/21 ACT budget, this sector urges the government to make budget decisions relating to mental health and wellbeing which are consistent with its stated policies and approach. To do so, the ACT Government must act on its own advice and substantially increase the breadth and depth of investment in the community mental health and related sectors.

⁶ Ibid. p.4

⁷ Shane Rattenbury, MLA, Media Release 3/6/2019

⁸ ACT Government, Better Services: Human Services Blueprint Canberra, May 2014, p.3

Decision making framework

MHCC ACT recommends that all 2020/21 ACT Budget decisions made in relation to mental health, have as a major consideration the extent to which they contribute to:

1. A mental health system for everyone – is there somewhere for everyone to go for support regardless of diagnosis, NDIS eligibility, severity of symptoms, stage of life, income, location, disability, gender, race, etc.? Will outcomes from budget decisions fill gaps, reduce waiting lists and eliminate the need for people to go interstate to obtain supports? Are they appropriate for local conditions?
2. A well-integrated system – does the decision contribute to integration within the sector and between sectors, or does it lead to further sector fragmentation causing difficulties in navigation, access, collaboration and information sharing? Are connections between government, private and not for profit services and organisations strengthened by the decision?
3. Sustainability and best practice – are services and supports recovery focussed and trauma informed? Does the decision result in longer term funding cycles and funding certainty? Does it allow for reasonable overheads, training and development of staff? Are programs producing positive outcomes encouraged and showcased? Is the voice of lived experience of mental illness central to the program? Is innovation possible? Is design and evaluation based on outcomes instead of outputs? Is there built in flexibility to respond to different needs, including the most complex needs?
4. Promoting a partnership approach – does the decision promote information exchange and trusted partnerships between government and non-government organisations? Is there room for codesign and coproduction? Does it include the expertise of people with lived experience?
5. VALUE for money – is the decision evidence informed? Does it support people to stay well in the community and reduce the demand on more expensive acute services? Is it based on outcomes rather than outputs? Does it lead to long term benefits rather than just short term ones? Are contracts long enough to properly develop and evaluate programs and services, as well as attract and retain qualified staff? Is evidence informed innovation encouraged?

Recommendations

RECOMMENDATION 1: Adequate funding to properly implement recommendations and outcomes from existing government initiatives, including:

- 5th National Mental Health and Suicide Prevention plan
- Regional Mental Health and Suicide Prevention plan
- Recommendations from the 2019 Productivity Commission inquiry into the social and economic benefits of improving mental health (forthcoming)
- Office for Mental Health and Wellbeing work program
- ACT Wellbeing Index initiative

How?

- Additional resources are often needed to ensure the effective implementation of recommendations from such reports
- Ensure a collaborative inclusive approach between government and non-government to developing and implementing recommendations successfully.

Why is this important?

- Additional investment is needed in population mental health and wellbeing – these reports and initiatives provide a much needed framework for decision making around this.
- Due to the breadth and depth of such processes these reports provide important analyses and guidance to improve mental health and wellbeing services

Explanation

- Significant investment is made into these reports by both government and non-government stakeholders. Funding appropriate and effective implementation represents best value to tax payers.

RECOMMENDATION 2: Agree to the request for a six month extension to the ACT Recovery College Trial (refer to separate submission)

How?

- Funding of \$188,197.00 is sought to allow the Recovery College to operate for an additional two terms covering January-June 2021

Why is this important?

It will allow for:

- the minimum adequate data and information collection to inform the official evaluation of the College
- finalisation of a suite of co-developed courses, the essence of what a Recovery College is about
- realignment of funding to financial years in line with the budget process.

Explanation

The **full details of this request are made in a separate submission from the Mental Health Community Coalition ACT**, the lead agency for the trial of an ACT Recovery College.

Recovery Colleges occupy a unique niche in the suite of mental health services available to people. Evidence from other Recovery Colleges shows they contribute strongly to a person's recovery, including by effectively reengaging in employment, education, volunteering and other aspects of life. Early results suggest the same thing is happening with the ACT Recovery College.

A Recovery College uses an adult education approach based on the principles of authentic codesign and coproduction between people with a lived experience of mental health challenges and professionals working in a mental health field.

RECOMMENDATION 3: Invest in a sustainable robust community mental health sector

How?

- Recognition of the distinct and vital role of community organisations in improving and supporting the mental health and wellbeing of Canberrans
- Ensure the full costs of service delivery are paid for
- Longer funding cycles and certainty
- Ensure ongoing strong mental health peak bodies to work collaboratively with consumers/carers/services providers and the government to achieve positive change and inform policy and programs
- Recognition that simple free market principles will not on their own deliver the best outcomes for mental health and wellbeing of Canberrans
- Ensure best practice contract design and management to facilitate optimal outcomes
- Value local knowledge and expertise.

Why is this important?

The community mental health sector plays a vital role in delivering non clinical services outside of hospital settings. These non-government organisations offer recovery, early intervention, prevention, health promotion and community support services for people with a mental illness. They are based on principles of social inclusion and recovery.

As is stated many times in this submission, community mental health organisations provide good value for money in terms of supporting people to stay well in their community and reducing the need for more expensive and intensive acute services. This is also one of the themes explored in the Productivity Commission draft report on Mental Health Overview and Recommendation (October 2019).

The majority of these organisations are not-for-profit and for-purpose organisations. To be robust and sustainable they, like others, need a level of financial stability and certainty and the ability to innovate and invest in their staff, services and processes. Also, like any other organisations they will respond rationally to market signals.

Explanation

Member organisations have been reporting to MHCC ACT for some years now that the changes to their operating environment since the introduction of the NDIS and, to a lesser extent the commissioning role given to the Primary Health Network (in Canberra the Capital

health Network), have introduced vulnerabilities in the sector not previously experienced. Key issues include:

- Organisations are not being paid the true cost of service delivery
 - In a sector which needs to take a whole of person approach, and which is encouraged not to duplicate service provision, the balance between competition and collaboration/cooperation has been skewed towards competition with negative consequences
 - Local knowledge and expertise is not being valued; often there is an expectation that it be given freely, including to government, big consulting firms and organisations new to the Canberra market. This is unsustainable.
 - Sometimes government decisions drive fragmentation instead of integration – different frameworks for contracts, definitions, reporting, eligibility, terminology
 - Best practice is difficult to implement – eg. codesign, engagement, evaluation, evidence informed programs and policies
 - Significantly increased, unfunded administrative burden.
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- Limited flexibility to respond quickly to episodic fluctuations of people with mental illness
 - Loss of funding for proven services in a range of areas including for people with the most complex needs.

RECOMMENDATION 4: Invest in a highly skilled and experienced community mental health workforce to meet the full range of mental health needs

How?

- Explore ways to support community organisations address impediments to best practice induction, training and development
- Expand the employment of Mental Health Peer Workers in ACT government services
- Support the Concept Brief from the ACT Mental Health Consumer Network (ACTMHCN) to fund Mental Health Peer Workers in community managed organisations (submitted to the Minister for Mental Health, Shane Rattenbury, on 24 October 2019)
- Work with the Commonwealth Government and the NDIA to change the NDIS financial model so that service providers can offer competitive pay and conditions to their employees (ie pricing reflects the real cost of delivering services).
- Explore ways to establish career pathways in the community mental health sector
- Ensure government contracts and contract management provide sufficient job security to help attract and retain staff.

Why is this important?

- Competitive remuneration, employment security, and adequate training, development and career opportunities are paramount to attract and retain an appropriately skilled workforce.
- A skilled workforce allows for the full range of appropriate services to be offered, so people with mental health challenges are able to recover and actively contribute to the community including by volunteering, paying taxes and expending income

- Without such a skilled workforce it is difficult to deliver appropriate supports and services meaning people inevitably become more unwell resulting in pressure on other government services, including acute health services, the justice system and housing.

Explanation

MHCC ACT stakeholders are unanimous in their experience that since the end of block funding by the ACT government associated with the introduction of the NDIS, and the subsequent change to business models, it has become difficult to attract, retain and invest in an appropriately skilled workforce. This is an ongoing issue and is at a critical juncture. The key issues include:

- Increased casualisation due to a more fluid operating environment with much tighter margins
- Tighter operating margins allow limited capacity for the time and cost involved with induction, training and development of staff
- Inability to employ appropriately skilled staff, particularly for those with the most complex needs

This is particularly the case when it comes to the workforce providing NDIS services where we are seeing the emergence of a situation whereby the 10% of people with the most complex disabilities associated with mental health are being supported by the least qualified staff. *“The most vulnerable workforce is looking after the most vulnerable in the community.”*

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RECOMMENDATION 5: Address the unintended consequences from the NDIS for psychosocial disability services in the ACT

How?

- Ongoing and expanded funding for the Office for Disability Integrated Service Response Program (ISRP)
- Ensure people assumed eligible and waiting for NDIS services are able to access appropriate services
- Ensure people assumed eligible for the NDIS, but for whatever reason do not engage with the NDIS, also have access to appropriate services
- Ensure ACT government has ongoing capacity to engage deeply with the Commonwealth and the NDIA to address issues with the NDIS and psychosocial disability
- Explore ways to address financial strain in the sector caused by NDIS pricing not reflecting the true cost of delivering services
- Explore ways to ensure that NDIS services are recovery oriented and trauma informed
- Explore ways to ensure that the NDIS workforce is appropriately skilled to work with people with psychosocial disability

Why is this important?

People with mental health challenges who cannot access adequate support services have a high chance of escalating into crisis and thereby increasing demand on more expensive

⁹ Stakeholder quote from MHCC ACT budget consultation 29 August 2019

acute government services. Crisis intervention is high cost and resource intensive and can result in poorer recovery outcomes for people.

Economic fragility in the community mental health sector carries the risk of market failure. It also makes it more difficult to address the issue of thin markets for NDIS services.

Explanation

It has been widely reported that the NDIS has not been an easy fit for people with psychosocial disability. Reform is ongoing but has been slow and often poorly communicated. In the meantime people are falling through the gaps and services are struggling to remain viable.

Many assumptions made about participation in the scheme have proven wrong. Key issues include:

- The long waiting time (averaging around 9 months) between testing eligibility and accessing NDIS services – in the interim suitable supports for the person are only available to people with NDIS funding
- Certain population groups assumed to have been NDIS eligible have been found ineligible. As funding for the services they once accessed have been rolled into the NDIS these people are often left with little to no alternative supports
- Some people are not getting all their needs met within the NDIS
- The transactional nature of the NDIS does not adequately support recovery for people with psychosocial disability
- Some people with psychosocial disability are not engaging with the NDIS.

Assumptions underpinning the pricing framework for the NDIS mean that in many instances NDIS prices do not reflect the true cost of service provision. Some of the main issues arising from this include:

- Unparalleled financial fragility of service providers
- Employment of a highly casualised and low skilled workforce; recruitment and retention are difficult
- A genuine inability to provide services for people with the most complex needs at the prices offered by the NDIS, as well as cherry picking those service offerings which give organisations more financial viability
- Greatly reduced capacity to provide workforce orientation, training and development
- Reduced capacity to engage in collaboration, innovation and information sharing
- Unhealthy level of competition in a sector which needs to take a holistic and collaborative approach to supporting people in their recovery and wellbeing
- Shifting of risk to service providers
- Great increased and unfunded administrative requirements of service providers.

RECOMMENDATION 6: Ensure there is a mental health system for everyone

How?

- Investment in mental health services should keep up with Canberra's population growth and the rate of incidence of mental illness (ie the burden of disease)
- **Ongoing government investment is urgently needed to make the mental health system easier for people to access and navigate across the full range of government, private and not for profit services.**

- All services should be recovery oriented and trauma informed
- Invest in early intervention and prevention services and programs, including for repeat episodes of mental illness
- Give ongoing and long term support for initiatives like the trial of an **ACT Recovery College** and **PACER** co-response mental health capability
- Address the large gap between primary and crises services
- Make it easier to navigate across private, public and NFP services using the ‘No Wrong Door’ approach
- Improve the capacity for services to respond flexibly to individual needs
- Invest in family focussed support services

Why is this important?

The growing Canberra population increases the pressure on services. It is important to grow investment correspondingly to ensure all Canberrans can access services they need, when they need them. For example, between presenting at your GP for early intervention and ending up in hospital are many opportunities to intervene and support the recovery of people with mental health challenges. Currently there are not enough services to meet demand which increases the likelihood that people’s situation will escalate putting pressure on more intensive government services. Crisis intervention is high cost and resource intensive and can result in poorer recovery outcomes for people.

A mental health system that caters for everyone means more people are able to live a meaningful life, contributing to the Canberra community in various ways, eg. volunteering, employment, income expenditure.

Explanation

As a consequence of the introduction of the NDIS some services no longer exist or are underfunded. Assumptions made about certain population groups transitioning into and receiving equivalent support from the NDIS have proven wrong, leaving some people without appropriate services.

Funding innovative programs like an **ACT Recovery College** promises benefits for the wider community. People with lived experience can learn skills for their recovery. Clinicians and medical professionals become better informed of the needs of people with lived experience.. The **Recovery College** also helps reduce stigma and discrimination.

MHCC ACT also strongly supports the long term funding of the Police Ambulance and Clinician Early Response, or **PACER**, model for mental health incidents in the community. In other jurisdictions similar models have reduced the need for police transportation or coercive measures by up to two thirds.¹⁰

The mental health system in Canberra is difficult to navigate. No one entity has a complete picture of the whole system. If people find the right services there are often long wait times for access. This creates barriers to a holistic, person focussed system which meets the ACT government aim for all Canberrans having access the right service, in the right place, at the right time. It also increases the likelihood that people become acutely unwell before they receive support.

¹⁰ Police Communications Centre Mental Health Liaison Service – Evaluation Report, Queensland Forensic Mental Health Service, May 2016, p.11

RECOMMENDATION 7: Invest in the economic and social determinants of mental health and wellbeing

How?

- Continue and expand funding for the Office of Mental Health and Wellbeing work program
- Invest in affordable housing for all, including the “Housing First” model
- Invest in education access for all and support for people to complete their education eg. flexible models within schools, school counsellors etc.
- Provide meaningful and appropriate employment for people with lived experience of mental illness
- Improve the person centred wrap around service coordination and cross government collaboration
- Invest in the twelve domains of the ACT Wellbeing Index
- Continue to invest in services that reduce socio-economic disadvantage

Why is this important?

A person’s mental health and many common mental disorders are shaped by various social, economic, and physical environments operating at different stages of life¹¹ Social inequalities are associated with an increased risk of many common (mental) health disorders.

Reducing socio-economic disadvantages will not only reduce inequality in our community but will also have a positive effect on the prevention of common (mental) health disorders. It will keep people out of the mental health system and improve the overall productivity of the ACT economy.

Explanation

By investing in the twelve domains of the ACT Wellbeing Index, the ACT government will increase the overall and individual wellbeing of Canberrans. This will have a sizable effect on the prevention of mental health issues in the ACT population. It will improve the recovery of people with lived experience and can lead to a reduction in the number of suicides.

There are indications that show that the socio economic status of parents can have a long term impact on the mental health and wellbeing of children and adolescents. Creating access to safe housing, education and employment will have beneficial effects on the whole family and future generations.

ENDS

¹¹ World Health Organisation, [Social determinants of mental health](#) 2014