

# **Queensland Mental Health Strategic Plan: 2003 – 2008**



**Queensland  
Government**  

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**Queensland Health**

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## Executive Summary

It is ironic at a time when Queensland is experiencing the highest ever standard of living, including the greatest advances in health care, that we are also reporting increasing levels of unhappiness and psychological distress. There is now a realisation that caring for the mental health of a community goes far beyond the provision of specialist mental health services. The mental health of a community is reflected in the strength of its community spirit, its families, and their access to work and recreation, housing and education. Ultimately, the mental health of a community is every one's concern.

The *Queensland Strategic Plan for Mental Health (2003-2008)* provides the framework for fostering the good mental health of all Queenslanders for the next five years and beyond. It recognises the need to promote the mental health of all citizens, while continuing to build the capacity for specialised mental health services to help those individuals who experience mental illness. While mental health services must take the lead in combating mental illness, improving the mental health of the community will require the combined efforts of the whole of the government and the community.

The Strategic Plan builds on the significant achievements in the reform of mental health services that have already occurred under the *10 Year Mental Health Strategy for Queensland (1996)*. Since 1996, Queensland has seen a rapid expansion in community mental health services and a rebuilding of inpatient services to make them more accessible to local communities. This Strategic Plan realigns the strategic directions for mental health development in Queensland, and the time course for achieving them, to ensure consistency with both the *National Mental Health Plan (2003-2008)* and Queensland Health's *Smart State: Health 2020 Directions Statement*.

The Strategic Plan is a detailed and comprehensive document, as is required to address the full spectrum of mental health issues confronting Queensland. Within this full spectrum, however, the Strategic Plan recognises there are certain areas that must be addressed as a matter of priority.

The resources required for core specialist mental health services will be further enhanced. Queensland faces an unprecedented population growth, which places pressure on all health services. Specialist mental health services need to grow in order to ensure that the more vulnerable members of our society, those with the most severe mental illnesses, can continue to receive quality and comprehensive mental health care. The Strategic Plan recognises that this enhancement in resources needs to be across the spectrum of care — including, inpatient services, community mental health services, and the non-government sector. At the same time, we need to develop innovative service modalities to extend the range of service options available, including community based alternatives to acute admission. The enhancement of resources includes the enhancement of the infrastructure necessary to support hospital and community services, especially the continued development of information systems. Meaningful and quality information is required to ensure the proper development and responsive delivery of mental health services.

The Strategic Plan also recognises that enhancing resources alone will not necessarily improve the quality of the mental health care provided. Quality of care is also improved through greater consumer and carer participation, refining models of service delivery to greater assist recovery, effective use of data and information systems, and strengthening the review and audit processes. Improving quality of care increases the safety of individuals with mental illness as well as the safety of the community at large. This in turn instils confidence in individuals and their families to seek treatment. Improving service quality across the spectrum of mental health services is a high priority of the plan.

Quality mental health services cannot be delivered without a capable workforce. Ensuring the availability of a strong and skilled workforce is another high priority of the Strategic Plan. Queensland, like the rest of Australia, is facing the challenge of a significant shortage of mental health workers, particularly in rural and remote, and outer metropolitan regions. Improved recruitment and retention of staff, however, is not enough. The expanding complexity of responsibilities for mental health workers, including forensic, drug and alcohol, early intervention, and community treatment issues, demands a work environment that supports the acquisition of knowledge and new skills for its staff.

Previous mental health plans recognised that mental health resources should be prioritised towards those in greatest need, particularly those individuals with the most severe and chronic mental illness. Strict adherence to this priority alone though tends to exclude other disadvantaged groups within our society, and fails to recognise that early intervention may alter the course of a mental illness. This Strategic Plan gives priority to improving service responsiveness and capacity to meet the needs of specific at-risk groups within the population, including individuals with dual diagnosis (mental illness and substance abuse), the indigenous population, and rural and remote communities. The continued high rate of suicide in Queenslanders, particularly our indigenous Queenslanders, ensures that suicide prevention also remains a priority of the Strategic Plan.

Recognising that good mental health is everyone's concern requires all government departments, and indeed all members and groups of the community, to be aware of their role in determining the mental health of the community and to work together to improve it. Queensland Health, and mental health services in particular, already have a good track record of forging partnerships with the police, general practitioners, and other agencies to improve mental health outcomes. The final priority of the Strategic Plan is the development and strengthening of partnerships between mental health services and key agencies across the entire spectrum of mental health interventions. Significant amongst these partnerships will be the support of public health services in implementing promotion and prevention programs; working with other government departments who support the mentally ill (such as police, ambulance, disability services, employment, housing, and alcohol and drug services) and increasing the range and availability of services provided through the non-government sector.

*The Queensland Strategic Plan for Mental Health (2003-2008)* builds on the achievements and directions established in previous National and State Mental Health Plans. It continues the development of high quality specialist mental health services, while providing a framework for addressing the mental health needs of the entire community.

## **1 Introduction**

There is increasing recognition of the growing prevalence and impact of mental illness and mental health problems on our community. Both international and national studies demonstrate that as many as one in five people experience a mental health problem, and predict that depression will become the second largest cause of global burden of disease within the next twenty years. Recognition is also increasing of the role of social, economic and environmental issues in the development of mental illness, together with acknowledged biological and psychological factors.

People with mental illness and the mental health services who support them, have suffered from a history of stigma, discrimination and neglect, which has created barriers for people in accessing treatment and care. A process of significant reform and development commenced in the early 1990s to redress this problem. As a result, mental health services are now established as part of the mainstream health service system in Queensland. While continued development is required to achieve optimal resource levels, the broad components of care and structures of the mental health system are now largely in place.

Mental health services and structures are under increasing pressure as demand for services continues to grow as a result of population growth, increasing prevalence of mental health problems and mental illness, and increased community awareness and willingness to seek treatment. An increase in the severity of illness and complexity of the problems being experienced is placing further stress on the mental health system. The increasing severity of disorders has been associated with the high prevalence of substance use in the community, increasing numbers of people with multiple and complex social and health problems, and the particular issues associated with an ageing population.

Improving mental health services alone will not be sufficient to provide a sustainable mental health system or achieve required mental health outcomes at the community level. Coordinated responses are required which incorporate actions at the population, community and individual level, and span the full

spectrum of intervention from promotion of mental health and the prevention of mental health problems, to the provision of treatment and ongoing care to people with mental illness. Active involvement will be required from a wide range of government and community stakeholders who have roles in protecting and improving health and wellbeing within the broader social, economic and environmental contexts.

The *Queensland Mental Health Strategic Plan: 2003 – 2008* provides a framework for the next stage of development of mental health in the state and encompasses outcomes and strategies to progress the involvement of a range of government and community stakeholders in this process.

## **2 Planning Context**

### **2.1 National Mental Health Strategy**

Significant impetus and direction for mental health reform has been provided by the National Mental Health Strategy.

- The *National Mental Health Plan (1993 – 1998)* focused activity on the structural and procedural reform of specialised mental health services to ensure more accessible, consumer focused and high quality care for people with mental illness.
- The *Second National Mental Health Plan (1998 – 2003)* continued the focus on improving the quality of treatment services, and expanded the agenda to include attention to mental health promotion, prevention and early intervention, and to strengthen recognition of the roles of other sectors as partners in service delivery.
- The *Third National Mental Health Plan (2003 – 2008)* focuses on consolidating the directions of the previous plans. The scope for mental health planning is widened from centering on people with mental illness to considering the role of mental health in individual and community quality of life, and the need for comprehensive, coordinated strategies to address the growing incidence of mental health problems. The plan proposes development of systems and processes across the range of sectors, which have responsibilities in promoting mental health and reducing the impact of mental health problems and mental illness on individuals and communities.

Key areas for action identified within the *Third National Mental Health Plan* include:

- Continued development of high quality specialised treatment services;
- strengthened mental health promotion and prevention programs;
- improved linkages between primary health and mental health services to support access into and out of specialised mental health care;
- coordination of treatment across services for people with complex health needs;
- increased capacity and linkages between government, non-government and community services to ensure access to an increased range of service and support options for people with mental health problems, mental illness, their families and carers;
- enhancement of disability support, education, employment, housing, family and community services to ensure appropriate access and outcomes from these services in promoting and maintaining mental health, facilitating recovery and reducing the impact of mental illness.

Associated frameworks developed to support implementation within priority areas include the *National Action Plan for Promotion, Prevention and Early Intervention for Mental Health (2000)*, and the *Aboriginal and Torres Strait Islander Social and Emotional Wellbeing Framework*. A *National Policy on Multicultural Mental Health* is also being finalised for release in 2004.

## 2.2 Ten Year Mental Health Strategy for Queensland

The *Ten Year Mental Health Strategy for Queensland 1996 –2006* established a clear planning framework for the development of specialised adult and child and youth mental health services. The *Mid-Term Review of the Ten Year Mental Health Strategy* conducted in early 2003 found that substantial gains have been achieved in terms of enhanced resources, structures and functions within mental health services including:

- Development of a comprehensive network of mental health services providing acute assessment, treatment and continuing care across the state, with functional linkages established between rural and regional services to facilitate access to care
- Significant progressive enhancement of community based mental health service staffing to 22 staff per 100,000 population for adult services, towards a target of 30 per 100,000, and 23 staff per 100,000 population aged 0 – 18years for Child and Youth Mental Health Services, towards the guideline of 25 per 100,000 population
- More equitable distribution of acute and extended treatment inpatient resources across the state enabling treatment closer to people’s homes
- Increasing focus on acute assessment and treatment being available in the community on an extended hours basis
- Enhancement of specialised services for Aboriginal and Torres Strait Islander peoples and culturally and linguistically diverse groups

Major areas of work identified within the Strategy that require completion include continuing enhancement of community staffing to meet planning guidelines and review of the need for further development or redistribution of acute and extended inpatient beds.

## 2.3 Smart State: Health 2020

*Smart State: Health 2020 Directions Statement* emphasises the need for a broader conceptualisation of health than has been traditionally adopted, with specific attention given to strengthening the focus on health promotion and prevention, and developing whole-of-government approaches to supporting health and wellbeing. The development and provision of high quality, patient focused health services, which are accountable, sustainable and integrated within broader systems, is recognised as a key component within this context.

*Health 2020* provides a structure for planning for sustainable health services into the future. This includes the following strategic directions for health service development:

- *Taking a wider perspective on health:* aimed at strengthening whole-of-government approaches to address social, economic and environmental factors impacting on health, and to support healthy lifestyles and preventive health care
- *Targeting areas for health improvement:* improving health and wellbeing by implementing targeted strategies to address areas of illness which offer significant health improvement opportunities
- *Engaging communities in better health and health care:* developing strong partnerships between individuals, communities, health services and the government to improve health and ensure a responsive community and client-centred health system.
- *Integrated patient-focused health services:* ensuring access to appropriate, quality, integrated, patient-focused health services within a health system based on principles of equitable access based on need, evidence and sustainability.
- *Shaping the Workforce:* developing a dynamic health workforce to provide quality care.
- *Smart State research and technology:* ensuring access to current technology and building an environment for research and innovation within health care.
- *Paying for health in 2020:* ensuring sustainable services and effective financial stewardship.

The strategic directions articulated in *Health 2020* are closely aligned to those underlying the *National Mental Health Plan 2003 - 2008*, and have been adapted as the underlying structure for identified outcomes and strategies within this plan.

## 2.4 Integrated Strategy and Performance (ISAP)

The *ISAP* process has been established within Queensland Health as the mechanism for monitoring performance within the public health system. Application of the *ISAP* processes to implementation of this plan at Corporate and District levels will ensure that mental health services meet defined goals and contribute towards achievement of the *Health 2020* objectives.

## 3 Policy Principles

The following principles underpin the outcomes and strategies outlined in this plan:

<b>Accessibility:</b>	people requiring mental health services are entitled to timely, effective access to services regardless of where they live
<b>Responsiveness:</b>	mental health services and enhancement processes should be responsive to the specific and continuing needs of individual consumers, carers and communities
<b>Quality:</b>	the delivery of high quality, safe mental health services and enhancement processes must be ensured
<b>Sustainability:</b>	development of enduring systems of care must be ensured
<b>Integration and collaboration:</b>	mental health services and enhancement processes must be effectively linked with broader health service systems
<b>Accountability:</b>	mental health services must be accountable to all stakeholders for the services provided and effective use of resources
<b>Consumer focus:</b>	consideration of consumer needs is central to all service planning and delivery
<b>Recovery orientation:</b>	all mental health service delivery must support consumers individual processes of recovery
<b>Population approach:</b>	mental health enhancement processes must encompass the full spectrum of needs and interventions required by all sectors of the population.

## 4 Priority Action Areas

The following areas have been identified as priority areas for immediate action:

- Continuing enhancement of core specialised mental health services
- Improving service quality and safety
- Improving service responsiveness and capacity to meet the needs of specific population groups
- Strengthening partnerships across the spectrum of intervention
- Improving availability and use of data and information in service evaluation and planning
- Ensuring the availability of a strong and skilled workforce

These priorities are themes reflected in the outcomes and strategies identified within the plan, linking activities across identified strategic outcome areas.

## 5 Key Stakeholders and Scope of Responsibility

The *Queensland Mental Health Strategic Plan 2003 – 2008* aims at informing the development of comprehensive systems to support mental health and wellbeing for Queenslanders. This includes both enhancement of the broad health and community contexts which impact on mental health and support the effective functioning of the treatment system, and the continuing improvement of health service systems to assist those people who at risk of, or experiencing mental health problems or mental illness.

Implementation of the plan will require involvement from multiple sectors over the identified period. The range of stakeholders who will have a role in achieving the outcomes of the Plan includes:

- other government departments and local government agencies
- public sector health services at both corporate and district service levels
- private sector health services
- non-government and community organisations
- consumers, carers, families and communities

While primary responsibility for implementation will rest with Queensland Health, the broader stakeholders will be involved in progressing the full scope of the plan. The development of partnership arrangements across the range of stakeholders will be essential to affirm shared responsibilities, establish complementary undertakings and ensure the success of the plan.

## 6 Strategic Outcome Areas

The *Queensland Mental Health Strategic Plan 2003 – 2008* is structured within six broad strategic outcome areas:

- Taking a wider perspective on health
- Targeting areas for health improvement
- Engaging communities in better health and health care
- Improving the provision of integrated, patient focused mental health services
- Shaping the workforce
- Enhancing the quality and value of mental health services

These strategic outcome areas are interdependent and together provide a comprehensive framework for improving the mental health of all Queenslanders. Strategies for progressing achievement of the outcomes are identified in each area and encompass activities to be undertaken at both the corporate or systems level and at the health service or district level. While many of these strategies have relevance for implementation at both levels, some have a more limited focus. Implementation will require planning within relevant corporate and district work units to identify the specific strategies which apply to that setting, and for which responsibility is to be undertaken in progressing achievement of the identified outcomes.

### 6.1 Taking a Wider Perspective on Health

#### **Key Issues**

- All areas of public policy have the potential to impact on the mental health of individuals and the community. The most direct impact is experienced through health, housing, welfare, work and income, education, employment, justice, police, local government and community agencies. Active engagement of these areas in promoting mental health and wellbeing in the general population is necessary.
- Social policy must ensure the provision of safe services and environments. People with mental health problems and mental illness are particularly vulnerable to the impact of environmental

factors and require particular consideration in the planning and delivery of services to ensure their wellbeing is supported.

- Awareness and understanding of mental health issues, including protective factors for wellbeing, risk factors for mental health problems and common treatment modalities, enables people to take responsibility for protecting their own mental health and respond quickly to developing mental health problems. Awareness also assists in developing acceptance of people with mental illness within society, reducing the negative effects of stigma and discrimination which limit community participation and compound the impact of mental illness on the lives and futures of people with mental illness and their families.

### ***Target Outcome***

**The mental health of all Queenslanders is promoted and protected through:**

**Appropriate whole-of-government policy**

**Increased community awareness regarding mental health**

**Comprehensive mental health promotion programs.**

### ***Proposed Strategies***

- Establish cross-government processes to engage relevant departments in the promotion of mental health through internal policy and activities
- Enhance linkages between government initiatives targeting social inclusion and acceptance of diversity
- Develop and deliver a comprehensive public health mental health promotion program to increase community awareness and understanding and reduce stigma associated with mental illness
- Establish mental health promotion strategies to enhance protective factors and reduce risk factors at the population level within a range of appropriate settings including schools, families, workplaces, communities
- Develop and deliver specific mental health promotion strategies to address particular groups including children and young people, the elderly, Aboriginal and Torres Strait Islander peoples, people from culturally and linguistically diverse backgrounds and people in rural and remote areas

### ***Performance Indicators***

- Number of departments reflecting mental health promotion objectives in policies and services
- Community mental health literacy as measured by survey
- Number of universal mental health promotion programs delivered
- Number of health promotion programs targeting people with mental illness
- Participation levels within mental health promotion program areas

## **6.2 Targeting Areas for Health Improvement**

### ***Key Issues:***

- Some serious mental illness cannot be readily prevented. Other mental health problems or illness can be more easily influenced, such as some types of depression or drug and alcohol problems. Many of the known risk and protective factors that influence the incidence of mental health problems and mental illness can be targeted through prevention programs to influence both the development and course of illness.
- Risk and protective factors occur in all aspects of life and need to be addressed across a range of settings through partnerships with other sectors and the community.

- Evidence is available to support the effectiveness of specific prevention strategies. Ongoing development and implementation of prevention strategies should continue to build the evidence base to ensure available resources are utilised to gain maximum effect in improving long-term mental health outcomes.

### ***Target Outcome***

**Prevention of mental health problems and mental illness in the general community is enhanced through:**

**Mental health prevention programs targeting social determinants and risk factors for high prevalence disorders**

**Whole-of-government processes for suicide prevention.**

### ***Proposed Strategies***

- Develop and implement a coordinated public health mental health prevention program across all ages and within a range of settings
- Develop and deliver public health mental health prevention programs targeting depression and anxiety within the general population and specific at risk groups within appropriate settings
- Continue implementation of Queensland Government Suicide Prevention Strategy
- Develop and deliver public health mental health prevention programs targeting the impact of substance misuse on mental health and the development of mental illness
- Develop and deliver specific mental health prevention strategies to reduce risk factors and enhance protective factors in target groups within appropriate settings, including Aboriginal and Torres Strait Islander populations, people from culturally and linguistically diverse backgrounds and rural and remote communities.

### ***Performance Indicators***

- Number of prevention programs delivered which target mental health problems or mental illness
- Participation levels within prevention programs targeting mental health problems or mental illness
- Community awareness of prevention of mental health problems as measured by survey

## **6.3 Engaging communities in better health and health care**

### ***Key Issues***

- Empowerment of people with mental illness with regard to the management of their illness, treatment and care is essential for recovery.
- Families and carers of people with mental illness have a significant role in supporting treatment and recovery, and must be engaged and supported effectively to maximise this function.
- Consumers, families and carers have significant contributions to make in the planning and evaluation of services and in shaping service policies, structures and processes.
- Participation in community groups and organisations important to an individual's social and emotional wellbeing. Building the capacity of community organisations to facilitate participation by people with mental illness will support mental health and quality of life for individuals and strengthen community engagement.
- An appropriate range of client-focused non-government support services operating in close collaboration with specialised mental health services are required within an effective system of care for people with mental illness.

- Individuals, groups and organisations within the community will require specific skills and knowledge to effectively participate in engagement processes. Education and training to facilitate development of these skills should be an integral aspect of the engagement process.

### ***Target Outcome***

**Meaningful consumer, carer and family participation in service planning and delivery supports optimal outcomes for people with mental illness**

#### ***Proposed Strategies***

- Strengthen consumer, carer and family participation within mental health services
- Establish mechanisms to facilitate participation by special populations including Aboriginal and Torres Strait Islander peoples and people from culturally and linguistically diverse backgrounds
- Enhance the skills of service providers in involving consumers, carers and families in treatment planning
- Monitor consumer and carer participation and satisfaction
- Develop a framework for the employment of consumer representatives within mental health services
- Enhance the skills and capacity of consumers and carers to participate in service planning and review functions
- Involve consumers and carers in state-wide planning and review functions

#### ***Performance Indicators***

- Consumer participation in service planning as measured by service audit
- Number of consumer, carer and service provider participants in training programs regarding consumer and carer participation
- Consumer and carer satisfaction with participation as measured by survey

### ***Target Outcome***

**Broad community engagement in assisting people with mental illness and mental health problems supports recovery**

#### ***Proposed Strategies***

- Establish whole-of-health approaches to engaging communities in activities that support mental health and well-being
- Enhance the capacity of community organisations to support people with mental illness
- Support development of a comprehensive range of client-focused, collaborative non-government sector services
- Develop cross-government collaboration to coordinate enhancement of community and non-government sector services within identified communities
- Develop partnerships between mental health services and local non-government community organisations to improve services for people with mental illness
- Implement the *Social and Emotional Wellbeing Framework* to enhance the capacity of Aboriginal and Torres Strait Islander communities to address mental health issues
- Facilitate development of community services within culturally and linguistically diverse communities to support people with mental illness.

#### ***Performance Indicators***

- Measurement of community capacity
- Number of community partnership arrangements between mental health services and community organisations
- Achievement of agreed partnership outcomes between mental health services and community organisations

## 6.4 Improving the provision of integrated patient-focused mental health services

### *Key Issues*

- Effective mental health services require appropriate staff, non-labour and capital resources. Significant enhancement of Queensland mental health services is required to achieve endorsed state and national staffing benchmarks, maintain capacity against the increasing demand of population growth and address the expanding range of service functions to be performed within contemporary practice.
- Funding models are required which reflect variations in population need and facilitate flexible service responses at the district level. Population-based funding does not address the specific demands associated with specific needs groups within identified catchment areas. Barriers also arise where resources are unable to be shifted between service components to reflect local service demands.
- Increased service responsiveness and an early intervention focus are required to facilitate access to care and minimise the development and impact of mental illness. Delayed response increases the risks to the individual and community associated with mental illness, and may lead to poorer outcomes over the long term.
- Development of a recovery focus within treatment services is critical to support people with mental illness in their process of personal growth and development within the context of their illness and in the establishment of fulfilling lives as participating members of their community.
- Effective response is required to the increasing complexity of consumer needs, particularly associated with alcohol and substance use, severe behavioural disturbance or physical illness. Such complexities place significant demands on services, challenge traditional service boundaries and require close collaboration with other providers.

### ***Target Outcome***

**Improved access to and responsiveness by mental health services through:**

**Enhanced early intervention capacity**

**Stronger links between mental health and primary health services**

### ***Proposed Strategies***

- Develop an early intervention orientation and enhanced responsiveness in all services through skill development and cultural change
- Enhance collaborative processes between mental health services and primary health providers including General Practitioners, to facilitate access and support management by the primary care provider
- Build collaboration between mental health services and Emergency Departments to facilitate assessment and access to treatment
- Strengthen mental health consultation and liaison services to other inpatient health services
- Develop the capacity of mental health services to identify, assess and respond to substance misuse problems within mental health treatment services
- Develop processes for collaboration between mental health and alcohol, tobacco and other drug services to improve response to the mental health needs of people with substance misuse problems
- Strengthen service capacity to respond to suicidal risk behaviours and ensure appropriate follow-up for those people identified as having an increased risk who have been in contact with a health service

- Develop collaborative processes with primary health and other services to:
  - improve responses to infants and young children in situations of serious risk to future mental health
  - enhance responsiveness to young people through outreach to the primary care setting
  - identify mental health problems in older people and facilitate collaborative intervention within primary health and aged care settings
  - facilitate early identification and response to mental health issues in Aboriginal and Torres Strait Islander peoples in the primary care setting
  - enhance access to culturally and linguistically appropriate assessment and primary care intervention for people from diverse backgrounds
  - enhance the capacity of courts and correctional services to identify mental illness within prison populations and support provision of treatment services within that setting

### **Performance Indicators**

- Primary care satisfaction as measured by survey
- Number of Shared Care arrangements
- Number of locations where Emergency Department guidelines implemented
- Access by identified population subgroups as measured in activity data

### **Target Outcome**

**Enhanced service capacity ensures a comprehensive range of specialised assessment, treatment and support services is available to those people who require this level of service throughout Queensland**

### **Proposed Strategies**

- Enhance community mental health service staffing including:
  - Continue enhancement of community mental health services to meet staffing guidelines as endorsed in the *Ten Year Mental Health Strategy for Queensland* as a minimum resource benchmark
  - Review community staffing guidelines for Adult and Child and Youth mental health services to reflect expanded roles in prevention, early intervention and intersectoral collaboration and additional legislative requirements established since endorsement of the above guidelines
  - Develop needs-based planning formulae to identify variations in morbidity and service demand
  - Revise funding models for non-labour and infrastructure resource allocation to ensure service sustainability
- Improve access to acute inpatient treatment including:
  - Develop improved capacity for inpatient admission of adolescents and young people in central and northern Queensland, and enhancement of regional services to support the admission of young people to paediatric and adult inpatient environments where necessary
  - Develop additional adult acute inpatient bed capacity to meet current and future demand due to population growth in identified locations
  - Identify requirements for acute psychogeriatric inpatient beds in major centres and plan capital development to ensure provision of appropriate inpatient environments for older people
  - Develop model for community-based alternatives to acute and sub-acute admission to enhance inpatient capacity for adults and adolescents
  - Pilot development of alternatives to admission in identified sites with non-government organisation participation where appropriate
- Improve access to extended inpatient treatment including:

- Continue redistribution of extended inpatient treatment and rehabilitation resources to improve access to extended treatment in regional centres
  - Evaluate comparative effectiveness of facility and community based extended inpatient services and plan future needs to meet service demand
  - Review future requirement for Medium Secure inpatient services and plan capital development as required
- Improve service capacity to address the needs of particular population subgroups:
    - Support development of collaborative services to address the needs of infants and young children within families with severe and complex needs
    - Enhance capacity of services to provide assertive outreach to adolescents with complex needs or serious behavioural problems
    - Develop dedicated young people's treatment services for people aged 15 – 25 years, which link Child & Youth and Adult mental health services and support psychosocial development and maintenance of engagement in education, employment and social support systems
    - Enhance capacity of adult mental health services to provide age appropriate services to older people with mental illness through the development of expert service hubs providing consultation liaison advice, support and tertiary referral
    - Develop outreach and collaborative processes with other agencies to facilitate provision of assessment and assertive treatment services to homeless people with mental illness
    - Enhance the capacity of mental health services to provide culturally safe and appropriate treatment to Aboriginal and Torres Strait Islander peoples in partnership with ATSI health services
    - Promote access to bilingual clinical consultation services to facilitate appropriate assessment and treatment for people from culturally and linguistically diverse backgrounds
    - Improve access to high quality integrated treatment services for people with mental illness within the criminal justice system with a particular focus on Aboriginal and Torres Strait Islander peoples
    - Continue implementation of guidelines for collaboration in provision of treatment to people with mental illness and intellectual disability
- Develop collaborative partnerships to facilitate improved treatment and recovery for individual consumers including:
    - Develop collaborative partnerships between mental health services and other government and community sector services to ensure access to housing, employment, disability support, education and social services as required to support rehabilitation and recovery
    - Develop partnerships and collaborative processes with other health, government and community services to support the delivery of coordinated comprehensive care to individuals with complex health, disability and social support needs
    - Continue support for improvement of public-private partnerships to facilitate access to expert, comprehensive treatment services
- Build a recovery focus within all services through workforce development strategies targeting all staff levels to ensure recovery focused workplace culture and attitudes and build workforce capacity
  - Develop a model of service for rural and remote areas to reflect resource and staffing availability, outreach support requirements, collaboration with primary health and other service providers, utilisation of technology and accountability mechanisms.

### ***Performance Indicators***

- Revised staffing guidelines endorsed
- Community staff per unit population relative to endorsed planning guideline
- Bed numbers and mix per unit population relative to endorsed planning guideline
- Distribution of inpatient beds per unit population

- Number of community-based alternatives to admission

## 6.5 Shaping the Workforce

### **Key Issues**

- Innovative strategies are required to address current and projected shortages in the skilled staff required to deliver specialised mental health services and to ensure that available staff are utilised effectively.
- The broader health and community sector workforce form an integral component of the mental health system, and should be assisted in developing the skills required to fulfil this role.
- A culture of ongoing learning and development is necessary to ensure services and systems are dynamic and open to change.
- Ensuring appropriate staff skills, attitudes and behaviours is fundamental to quality service provision.

### **Target Outcome**

**Workforce sustainability is ensured through effective planning and management processes**

### **Proposed Strategies**

- Develop a strategic plan to meet future workforce requirements, including specification of future roles and skills needs including non-professional support workers, emerging health practitioner roles and impact on professional discipline careers and training, and workforce development required to address needs of specific population groups
- Identify and manage industrial implications of ongoing workforce development to meet future requirements
- Develop specific strategies to address issues of recruitment, deployment and retention of skilled staff within mental health services, with a particular focus on regional, rural and remote area services
- Establish effective systems for workforce data collection and management to support improved workforce planning and management

### **Performance Indicators**

- Workforce plan developed
- Recruitment and retention indices

### **Target Outcome**

**Current and future workforce capability is ensured through ongoing processes to develop and maintain the knowledge, skills and attitudes required for contemporary mental health service delivery**

### **Proposed Strategies**

- Develop specific training, resources and support systems to target skills enhancement regarding core service functions including case management and team leadership, and new roles and expertise such as early intervention, substance misuse, and involvement of consumers and carers.
- Implement the *AHMAC Aboriginal and Torres Strait Islander Cultural Respect Framework* within mental health services to ensure a culturally respectful environment for both Aboriginal and Torres Strait Islander clients and employees
- Establish a sustainable state-wide mental health knowledge management strategy

- Ensure inclusion of primary health, non-government and other sector workforce development needs in education and training processes
- Establish partnerships with tertiary education sector to ensure education and training programs are responsive to identified future workforce needs

### ***Performance Indicators***

- Number of education and training components available
- Number of mental health service staff per level participating in education and training
- Number of other health and non-government sector participants in training programs
- Participant satisfaction ratings of education and training programs
- Knowledge management program impact on service delivery measured by survey

### ***Target Outcome***

**A workplace environment which supports continuing service improvement and promotes the health of all stakeholders.**

### ***Proposed Strategies***

- Develop processes to promote culture of development, openness to change and continuous improvement through supervision and performance management
- Implement initiatives to promote health of the workforce and enhancement of the role of workplace environments in supporting workforce health and effectiveness

### ***Performance Indicators***

- Measure of organisational climate
- Percentage staff engaged in performance management
- Percentage staff engaged in professional supervision

## **6.6 Enhancing Quality and Value of Mental Health Services**

### ***Key Issues***

- Coordinated evaluation, review and monitoring processes are required to ensure that service delivery is effective, efficient and meeting required quality standards.
- Access to and utilisation of appropriate and valid information regarding service activity and outcomes is critical to support decisions regarding service quality, effectiveness and efficiency, and to guide planning for future requirements at all levels of the organisation.
- Investment in research and innovation underpins ongoing development and improvement of service delivery processes and systems. Timely and effective dissemination of research findings and facilitated application to other settings must be ensured.

### ***Target Outcome***

**Ongoing service and system improvement is ensured through:**

**Effective quality management and oversight mechanisms**

**Information systems which provide high quality, accurate and timely information on service delivery and resource management**

**Research and development activities to extend the evidence base underlying practice**

## ***Proposed Strategies***

- Develop processes including standardised protocols, guidelines and review mechanisms to support consistency in service delivery across the state and establish quality and safety requirements for risk assessment, treatment planning and service delivery.
- Continue development of processes to support implementation and improvement of the legislative framework and integration into development of high quality service delivery systems
- Develop processes to enhance utilisation of available information regarding activity and outcomes in evaluation of practice and ongoing service improvement
- Ensure information systems meet commonwealth and state requirements, including data standards and Queensland Government Information Standards
- Ensure development and implementation of high quality, sustainable mental health information systems
- Ensure development and implementation of appropriate replacement for Client Event Services Application (CESA), including migration and preservation of information held in CESA
- Develop and implement processes to improve and support appropriate utilisation of information in decision making regarding mental health service planning and delivery at the individual, service, district and corporate levels
- Improve quality of data collection regarding services provided to special populations including Aboriginal and Torres Strait Islander peoples and people from culturally and linguistically diverse backgrounds.
- Develop systems to collect data regarding activity and outcomes for areas of activity including mental health promotion and prevention
- Develop key performance indicators to monitor achievement of identified goals and targets for mental health systems at all levels
- Establish processes for benchmarking to allow meaningful comparisons between services and inform ongoing service improvement
- Develop research capacity and culture within services to stimulate innovation, inform service planning and delivery, target areas for service improvement and provide evidence base for ongoing service development
- Continue support for research partnerships with tertiary education sector and improve translation of results into service improvement

## ***Performance Indicators***

- Clinical Audit reporting
- Quality review system established
- Measured quality indices
- Sentinel events
- Risk management system established
- Service activity and outcome analysis and reporting at service level
- Information system participation and data quality indicators
- Collection of national mental health performance indicators

## **7 Evaluation**

Achievement of the overall aims and specific outcomes defined in this plan will require commitment and involvement across a number of sectors. While the major activities will occur within mental health and broader health areas, complementary undertakings will be required across other government and community agencies.

Evaluation of the Plan will be an integral part of implementation and will be incorporated into a range of existing mechanisms including:

- the evaluation of the National Mental Health Plan 2003-2008, and

- within Queensland Health, as part of the ISAP process where each work area will be responsible for defining activities against the relevant strategies, and setting appropriate measures to evaluate performance. A mental health strategy map will be developed to guide this process.

Additionally an internal Queensland Health review will be undertaken in the 2007-2008 financial year. This review will incorporate the findings of the National Mental Health Plan 2003-2008 evaluation and ISAP measures to determine future directions for mental health in Queensland.

Performance indicators have been identified in the Plan against which success or lack of success can be measured and what data needs to be collected.