

25 August 2021
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National Mental Health Workforce Strategy Taskforce
Submitted Online

### **Development of the National Mental Health Workforce Strategy 2021-2031 – Submission**

### 1. To what extent does the aim of the draft Strategy address the key challenges facing Australia's mental health workforce?

Relationships Australia welcomes the opportunity to provide feedback on National Mental Health Workforce Draft Strategy to support the Australian mental health workforce who treat people experiencing suicidality, mental distress and/or ill health. Relationships Australia recognises the integral role the mental health workforce plays in reaching the mental health and wellbeing outcomes outlined by various reforms across Australia's mental health system. Ongoing issues pertaining to workforce shortages and distribution, skills, best practice and utilisation threaten our ability to improve the mental health and wellbeing of all Australians, and, as such, we support a strategy that seeks to address these issues on a national scale.

Consistent with Pillar Four in the Australian Government's Australia's Long Term National Health Plan, our federated state-based organisations are already working with regional Primary Health Networks to provide targeted support in place-based strategies that directly meet needs of local communities. Through this work, we appreciate the challenges identified in the Draft Strategy for identifying, recruiting, and retaining lived experience and psychosocial support workers particularly in regional and remote areas, and appreciate the importance of maintaining local connections in community to resource for roles as need becomes prevalent.

## 2. To what extent do the aim and objectives provide a strategic framework to develop the mental health workforce the Australian community needs?

Relationships Australia believes that the aim of the strategy effectively outlines the goals that a strategy such as this should aspire to. We are especially supportive of the shift to encompass prevention and early intervention which will promote wellbeing and reduce the likelihood of people needing to engage with more acute services.

With the stepped care model endorsed in Vision 2030, Relationships Australia serves as a government partner that has specific insights to offer in provision of early intervention or low impact services in respect of mental health service delivery, with some delivery of high intensity services also shared across our state based organisations. We recognise the benefit of clear professional requirements in the provision of services, and the importance of strong internal supervision structure and process, as well as the difference that it can make for service recipients to connect with practitioners who appreciate the concerns of people from direct local or lived experience knowledge.



### 3. Are there any additional priority areas that should be included?

Relationships Australia recommends including the importance of healthy relationships as areas for actions within the objectives of retaining members of the workforce and ensuring that careers in mental health are attractive. A recent survey conducted by Relationships Australia found that during April, 63% of respondents experienced changes to their mental health in response to Covid-19 related changes in their workplaces and working conditions. Furthermore, we found that those respondents who agreed that their workplace was part of their social life were far more likely to experience changes to their mental health following these workplace disruptions. This suggests that disruptions to our workplace relationships can be damaging to the mental health of Australians, especially those who work in the mental health sector.

Workplaces often operate as a 'meeting place' where people go on a routine basis and interact with regularity. One of the most challenging parts of addressing ill-mental health is reaching those who need care (Productivity Commission, p.20). For this reason, workplaces have a powerful ability to become spaces to which people turn for support and advice before issues become more acute.

In addition, social relationships created through work can have a protective effect against mental ill-health (Productivity Commission, p.172). However, this relies on solid foundations and a strong workplace culture that promotes mental health discussions and encourages social support among its workers. Ultimately, strong workplace relationships are essential to ensuring that these connections are created and maintained. Therefore, Relationships Australia believes it is necessary to identify in the 'positive elements of work', the social and supportive benefits of workplace relationships.

Similarly, the relationships people have outside the workplace can affect the mental health of people within the workplace. Family and relationship issues such as domestic violence, family disputes, problem gambling and trauma impact people's relationships and their mental health, which in turn effects them as employees. The interrelation between people's personal lives and their mental health cannot be ignored in a workplace setting. As such, Relationships Australia believes it is important to address people's relationships both within, and outside, the workplace, to explore how the positive social relationships created through work can support stronger relationships outside the workplace.

4. The draft Strategy seeks to balance the need for nationally consistent approaches that support the reform agenda with sufficient flexibility for states, territories and service providers to pursue priorities that reflect their specific contexts and challenges across occupations and settings (public, private and community-based). To what extent does the draft Strategy achieve an appropriate balance?

Relationships Australia supports the efforts made to ensure a national strategy while still allowing providers to pursue priorities that reflect their specific contexts and challenges across occupations and settings. Relationships Australia relies heavily on our federated model to achieve a similar balance, which allows us to support clients all over Australia, while still providing community and place-based care. Relationships Australia believes that the draft strategy strikes an appropriate balance, but would like to ensure that the areas for action reflect the aspirational aspects of the reforms taking place in mental health across Australia.



5. The draft Strategy provides a high-level roadmap to improve the attractiveness of careers in mental health, with implementation approaches differing across occupations and locations. To what extent does the draft Strategy provide a useful approach to addressing issues that impact on the attractiveness of the sector?

Relationships Australia supports the roadmap to improving the attractiveness of careers in mental health. We would also like to note the significant challenge that our mental health workforce experiences while supporting clients with complex trauma. Complex trauma refers to exposure to multiple traumatic events and the impacts this exposure has on a person's wellbeing. Particular cohorts that we service are more likely to have experienced complex trauma, which affects the mental health workforce in general. Part of what is challenging about supporting clients with complex trauma is the mismatch between funding services and the need for evidence-based practice, extensive case management and additional time and supports. Relationships Australia believes that a properly funded mental health sector which acknowledges these supports would reduce the pressures caused by complex trauma and the associated stress, burnout and fatigue experienced by staff.



# 7. The Productivity Commission and other inquiries have identified the importance of improving integration of care, and supporting multidisciplinary approaches. How can the Strategy best support this objective?

Relationships Australia provides various kinds of mental health services. As a leading provider of relationship support services for individuals, families and communities, we provide clinical support, as well as prevention and early intervention services. We also manage a national campaign known as Neighbour Day, which encourages social connection to end loneliness. This is a nation-wide intervention which develops social capital and inclusion in neighbourhoods and communities across Australia. When clients need specialised supports outside of our service provision, we provide warm referrals. Relationships Australia recognises the need for a multidisciplined approach to mental health and advocates for the inclusion of community-based supports in any reforms which seek to address mental health and wellbeing.

Contending with siloed and fragmented care is a major challenge associated with providing effective mental healthcare. Relationships Australia has spoken extensively about the effect siloed and fragmented care has on equitable access to support services (please see here for more details <a href="https://www.relationships.org.au/what-we-do/submissions-and-policy-statements">https://www.relationships.org.au/what-we-do/submissions-and-policy-statements</a>). Some issues which compound the effects of siloed and fragmented environments include:

- Tendering processes which encourage competition between services,
- Unstandardised reporting, evaluation and evidenced-based requirements,
- Lack of, or inadequate, efforts to support joint planning, place-based consultation processes, sharing research and learning, and building collective capacity of the sector,
- Lack of an online directory of services to support up to date referral practices, and
- Funding arrangements that cause resources to be diverted from service delivery to networking.

Relationships Australia realises that while these examples are specific to our discipline, they relate to the mental health sector more generally. We request that these issues be taken into consideration when designing a workforce which can support a multidisciplined approach.

8. There are recognised shortages across the mental health workforce, including maldistribution across metropolitan/regional locations and settings. To what extent does the Strategy address the issues and supports required to improve workforce distribution?

Relationships Australia is committed to working in rural and remote areas, recognising that there are fewer social support resources available to people in these areas, and that they live with pressures, complexities and uncertainties not experienced by those living in cities and regional centres.

Relationships Australia supports a more widespread and appropriate use of telehealth and the utilisation of new and innovative peer workforces. We have recently had success using peer workers in the disability sector, who have connections with local communities. We have found that peer workers who have community connections are an integral support to practitioners, especially when managing referrals, case management and other outreach tasks.



Relationships Australia has noted that in our provision of services, significant time and resources are spent on outreach services which are not always funded appropriately, and the time and effort providing these services is difficult to document when reporting to funders. This, in turn, leads to fatigue and stress for staff providing the service. Relationships Australia believes that the interconnection between maldistribution of the workforce and the other priority areas is indisputable and we believe that addressing the maldistribution will be one of the greatest challenges associated with developing a workforce that can meet the demands of the Australian mental health system.

9. Adopting a broad definition of the mental health workforce provides a platform for innovation to ensure all occupations are able to work effectively. How can the Strategy encourage innovation in service delivery models and workforce optimisation approaches?

ACOSS' 2021 Australian Community Sector Survey found that some of the greatest challenges to the community sector are activity-based funding and short and limiting contracts. The move to fund evidenced-based service was a necessary shift, however as this shift has occurred, there has been little thought about how to encourage innovation in the sector. Funding and contracts which provide innovation funding allow space for organisations, especially smaller ones, to innovate, develop, trial and pilot services. The Victoria 10-Year Mental Health Plan's innovation grants are an important example of this in the mental health sector. Relationships Australia suggests that a strategy that recognises the rarity of these kinds of contracts and supports funders to provide more, would create more innovation in the sector.