

**Senate Community Affairs References Committee**

**Inquiry into My Health Record System 2018**

**Briefing for Senator Siewert**

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**Reaching People with Mental Health Conditions**

**Subject**

The Agency has undertaken a comprehensive and complex communications and engagement strategy to ensure reach of MHR expansion messaging to all Australians, which aims to reach more vulnerable or harder to reach groups, including people with mental health conditions.

**Key points**

- The strategy to specifically ensure awareness of MHR expansion for people with mental health conditions involves a three-channel approach including raising awareness through their healthcare providers, broader health networks (such as peak and advocacy organisations) and non-health channels (including digital and other traditional paid media).
- The communications strategy has been designed to provide both breadth and depth, including broad reaching communications to make all Australians aware of MHR expansion through paid digital and traditional media and other broad-scale activities, as well as enabling greater understanding through provision of tailored information in different formats and languages, and personalised information through healthcare providers and consumer support organisations.
- The Agency has engaged with over 40 national and state-based peak advocacy and other organisations which represent or support a wide range of 'hard to reach' and vulnerable groups including the Australian Council of Social Services (ACOSS), Mental Health Australia, beyondblue, National Rural Health Alliance, headspace, SANE Australia, Black Dog Institute, National Mental Health Commission, Consumers of Mental Health WA (CoMHWA) and others, that engage directly with consumers with a lived experience of mental health conditions.
- The Agency has engaged the 31 Primary Health Networks (PHNs) throughout Australia to provide locally based engagement within the community, which includes hard to reach and vulnerable groups, including people with mental health conditions.
- This is in addition to a comprehensive national paid media campaign which is localised through PHN regions.

## Background

- The communications strategy encompasses a broad range of formats, languages and channels to provide Australians with multiple opportunities to see MHR messaging during the opt-out period, with sufficient depth of information to enable consumers to make an informed choice.
- Materials have been produced in a wide variety of formats including:
  - Written materials in digital and print formats, including information in 19 different languages
  - Digital materials – website, digital and social media
  - Videos – different length information animations, consumer and healthcare provider case studies, demonstration animations highlighting how to opt-out, how to set privacy settings,
  - Social media posts and tiles
  - Audio animations, translated into 13 Aboriginal and Torres Strait Islander languages
  - Accessible and low literacy materials, including Easy Read and Plain Text factsheets and (coming soon) Auslan translations.

### 1. Reach through health channels

- Consumer information materials are available at over 15,000 health service locations, including GPs, pharmacies, hospitals and health services, including mental health facilities and acute care.
- Tonic Media is also promoting MHR on digital screens in GP surgeries and many pharmacies nationally. 3726 healthcare provider digital panels and screens across Australia played 4 times every 30 minutes. Whilst not targeted on mental health specifically, they contain the key messages for during the opt-out period to assist people make an informed decision.
- State and Territory health jurisdictions are supporting education and awareness to hospital and health service staff.
- The Agency is working with clinical colleges and peak associations to provide education and awareness to GPs, pharmacies and allied health professionals.
- The Agency engage with a range of clinical peak organisations with expertise in the provision of care to people with mental health illness. These include the Royal Australian and New Zealand College of Psychiatrists (RANZCP), Allied Health Professions Australia (AHPA) and Australian College of Rural and Remote Medicine (ACRRM).

- On 30 April 2018, the Agency hosted a Mental Health forum in Brisbane. The event brought together participants from clinical and consumer peak organisations to discuss MHR and its use for patients with mental health illness.
- A Mental Health Working Group was established from those present at the forum with representation from additional peak organisations. The group is developing a toolkit to assist clinicians in having access to information pertinent to the use of the MHR for patients with mental health illness.
- The toolkit will include information on general functionality of the My Health Record as well as information of specific importance to the sector, developed through collaboration with members of the working group. The toolkit builds on existing material including webinars, factsheets, frequently asked questions and videos.

## **2. Reach through broader health networks**

- The Agency has engaged with over 40 national and state-based peak advocacy and other organisations which represent or support a wide range of 'hard to reach' and vulnerable groups, including mental health advocacy and support organisation.
- Many of these have been funded to assist with the dissemination of communication information directly to their members and to support tailoring of information for their members.
- The Agency has engaged with mental health organisations in the design and review of MHR collateral and promotional material. Discussions were held with headspace to provide input into the 14-17 year old and parent/ guardian factsheets.
- Materials provided including brochures, factsheets, digital and social media tiles and content, web content and content for newsletters and magazines, as well as speaking opportunities/booths at conferences and events.
- Organisations the Agency is working with includes peak and community organisations covering:
  - Mental health (including youth mental health)
  - Homelessness
  - Domestic and family violence
  - Rural and remote Australia
  - Aboriginal and Torres Strait Islanders
  - Culturally and Linguistically Diverse communities
  - Disability
  - LGBTI.

- The Agency partnered with Positive Life NSW and Health Consumers NSW to host two Community Information Forums to communicate the benefits of MHR and unpack any privacy and security concerns from those living with chronic health diagnoses (including mental health conditions). An event was held on Tuesday, 31 July 2018 with more than 100 consumer, community, health care professional and provider organisations attending. The next Forum will be held on 7 November 2018.
- The Agency jointly hosted two Community Information Forums with Consumers of Mental Health WA and the WA Primary Health Alliance in Perth on 18 -19 July 2018. The objective was to communicate the benefits of MHR and unpack any privacy and security concerns from those living with mental health conditions. More than 35 consumer, community, health care professional and provider organisations attended.
- The Agency is also holding a My Health Record Youth roundtable discussion/workshop to be held on 3 October 2018 in Perth as a follow-up with CoMHWa and headspace attending. This will include a focus on how we can better address the needs of young people, specifically those with mental health needs, in their use of MHR.
- Ongoing, the Agency will be focussing on helping to raise consumer digital health literacy, with particular focus on consumer groups with specific needs to manage their record and privacy settings such as people with mental health conditions or sensitive clinical conditions. The Agency will continue to work with key peak organisations to tailor materials and to disseminate information to these consumer groups to support use of their MHR into the future.

***PHN Engagement with Vulnerable Groups – including Mental Health***

- PHNs are contracted to reach a broad spectrum of the community, including vulnerable and hard to reach groups – people with mental health conditions will be directly reached as part of these target groups:
  - Aboriginal and Torres Strait Islander
  - Disability
  - Homeless
  - Rural and remote
  - Hard To Reach
  - Vulnerable Groups
- Regional communication leads in 5 PHNs have also developed relationships with state and regional-level advocacy and support organisations working with vulnerable groups including mental health organisations – organising

information/education sessions and writing articles and editorial for newsletters, social media posts tailored for the audience. This includes:

**NSW:**

- Mental Health Coordinating Council
- Way Ahead Mental Health Newsletter
- Mental Health Factual Article
- BEING - Mental Health & Wellbeing NSW Consumer Advisory Group
- Mental Health Carers NSW
- Red Cross NSW
- Health Consumers NSW
- YMCA NSW
- SENSW Men's Sheds
- Shelter NSW
- Mental Health Awareness Month

**QLD:**

- Qld Alliance for Mental Health
- QCOSS, NCOSS
- Qld Alliance for Mental Health
- Health Consumers Qld
- Mental Illness Fellowship Qld

**WA:**

- Shelter WA
- Health Consumers Council

**SA/NT:**

- Skylight Mental Health Services
- Relationships Australia South Australia, Mental Health Team (education sessions)
- OARS, Adelaide (Recently released Prisoners)
- Unity Housing: Homelessness and vulnerable populations
- Hutt Street Centre, Homeless Shelter
- NT Mental Health Coalition
- Darwin Asylum Seeker Support
- Catherine House, Adelaide
- OARS, Adelaide (Recently released Prisoners)

**VIC/TAS:**

- Whittlesea Men's Shed
- Mersey Community Hospital
- Thorne Harbour

***PHN local community engagement activities***

- Since the commencement of opt-out PHNs have delivered over 1000 local

community events across the country. Of these events, 222 have been targeting vulnerable groups including mental health-related community organisations and groups. This has included participation in R U OK Day events, information sessions for headspace staff and many others.

### **3. Reach through Non-Health Networks**

- The Agency is working with DHS Community Engagement Officers, Multicultural Service Officers and Indigenous Service Officers nationally to support MHR awareness raising as part of their outreach activities. DHS Community Engagement Officers operate nationally and provide on the ground support to vulnerable groups (mental health, homeless, women in shelters, people from culturally and linguistically diverse backgrounds and Aboriginal and Torres Strait Islanders) providing information and support with accessing government services such as Medicare and Centrelink.
- The Agency is working with the Queensland Department of Housing and Public Works (DHPW) to assist in reaching vulnerable groups via their public housing tenancy network. Materials will be distributed and displayed through their Housing Service Centre network which is made up of 22 drop in service centres around the state.
- We are also planning to work with DHPW to educate staff within these service centres on MHR and its features and benefits to consumers they service. Staff within these service centres include registered healthcare professionals who work closely with vulnerable groups with comorbidities often including mental health issues.

### ***Paid media***

- There are paid media campaigns underway during the opt-out period across national, regional and local advertising channels. Channels chosen have high frequency across outdoor media (bus sides, street furniture), radio, press and health media. Press and radio adverts have been translated into over 10 different languages to ensure our multi-cultural community receives awareness in their native language.
- Imparja TV broadcasts to over 3.6 million square kilometres, spanning six states and territories and reaches not only consumers living rurally and remotely, including 75,000 viewers in terrestrial black spots. The station also broadcasts to 200 very remote indigenous communities and has been endorsed as an optimal channel to reach these audiences.
- Although the messaging is not specific to people with a mental health condition, the paid media provides extremely high levels of awareness

of the expansion of the MHR system this year and where to go for more information or to opt out which is relevant for all audiences.

***People in Detention***

- Through consultation with states and territory justice departments, all persons in detention, 14 years and over, were given an opportunity to opt out.
- Specially designed low literate forms and fact sheets (translated into 19 different languages, including 2 indigenous languages) were couriered to every Australian facility including Forensic Units. Each facility was given a period of 30 days for each detainee to complete the form if they wished to opt out, and completed forms were then collected and securely returned to the Agency.