

**SOUTH AUSTRALIAN GOVERNMENT'S SUBMISSION
TO THE
SENATE COMMUNITY AFFAIRS COMMITTEE INQUIRY
INTO
MENTAL HEALTH SERVICES IN AUSTRALIA**

August 2007

Executive Summary

The South Australian Government welcomes the Senate Inquiry into mental health services in Australia and is committed to mental health reform.

The National Action Plan on Mental Health provides a strategic framework emphasising greater coordination and collaboration between government, non-government and private providers in order to develop and deliver a more seamless and connected system of care and aligns with the aims and objectives of the National Mental Health Strategy.

In particular, the action plan aims to improve mental health and recovery from mental illness through a greater focus on promotion, prevention and early intervention, enhance access to mental health services and increase access to accommodation and support and social, recreational and employment opportunities.

South Australia is strongly committed to mental health reform and has provided significant additional funds, over and above that committed when the COAG Action Plan was announced, to improve mental health service delivery, including implementation of a stepped model of care. In summary, the South Australian Government provided \$116.9 million over four years specifically for the COAG Action Plan, and in addition to this has provided over \$107.9 million over the next five years for mental health reform in response to the State's Social Inclusion Board report on mental health.

Mental health issues cut across all sectors and this presents particular challenges in regard to coordination and integration of services. There is a need to look across a range of portfolios including child protection, juvenile justice, disability, ageing, housing, employment and education in order to improve outcomes for people with a mental illness. It is also important to look across population groups especially the particular issues and needs of Aboriginal people as well as working in collaboration with non-government and other community based agencies. The successful achievement of reform in mental health is not just dependent upon improvements in the health care sector but the capacity to work collaboratively with a range of people, organisations and portfolios to address change across the community. This creates a set of unique challenges for mental health reform.

The Select Committee on Mental Health, which provided two reports in March and April 2006 respectively, and now the COAG National Action Plan has enabled the spotlight to be put on mental health and it has provided an important vehicle for collaboration and change. Change needs to be sustained and there remain many issues to be progressed. It is critical that the momentum for reform and action in mental health care is maintained and mechanisms such as this Inquiry play an important role in continuing to highlight gaps and needs in the system of care for people with a mental illness.

Recommendations

The South Australian Government recommends that:

1. A funding formula be implemented by the Australian Government in relation to the COAG National Action Plan on Mental Health 2006-2011 initiatives to ensure equitable distribution of resources across all states and territories.
2. Strong coordination mechanisms and partnership arrangements between the Australian Government and jurisdictions and across areas within jurisdictions need to be developed and implemented at a strategic and operational level in order to maximise recovery outcomes for mental health consumers, families and carers, minimise unmet need and ensure that people with mental health issues do not fall through the gaps.
3. Comprehensive monitoring, evaluation and reporting systems and processes be developed and implemented to ensure that the aims and objectives of the national strategic mental health framework are met.
4. Workforce infrastructure that supports the development and enhancement of all government and non-government mental health workers and professional groups be developed and implemented as part of a workforce retention strategy.
5. The National Mental Health Strategy *National Practice Standards for the Mental Health Workforce 2002* be reviewed and implemented.
6. Mental health promotion using a population based approach be targeted for further consideration as part of the mental health reform agenda in particular in the areas of building strong and resilient communities, promoting early years literacy and workforce development.
7. New initiatives targeting Culturally and Linguistically Diverse (CALD) populations should include funding for developing an appropriate strategy with the relevant community, the use of interpreters and evaluation.
8. A program be developed and implemented to support parents with mental illness and their children in order to minimise the need for children to be placed in out-of-home alternative care.
9. The access criteria for COAG psychosocial rehabilitation and support programs such as the Personal Helpers and Mentors program be broadened to include young people.
10. Specific focus be given to the need of young people with forensic mental health issues.

Introduction

The South Australian Government welcomes the Senate Inquiry into Mental Health Services in Australia. Mental health is a key priority of the South Australian Government as is evidenced by its strong commitment to a statewide mental health reform agenda and commitments under the Council of Australian Governments (COAG) National Action Plan on Mental Health 2006-2011.

This submission addresses the Senate Inquiry's Terms of Reference, being:

- the extent to which the action plan assists in achieving the aims and objectives of the National Mental Health Strategy
- the overall contribution of the action plan to the development of a coordinated infrastructure to support community-based care
- progress towards implementing the recommendations of the Select committee on Mental Health, as outlined in its report *A national approach to mental health – from crisis to community*
- identifying any possible remaining gaps or shortfalls in funding and in the range of services available for people with a mental illness

and in particular provides:

- background and contextual information
- identifies progress made by the South Australian Government to mental health reform including its responsibilities to the COAG National Action Plan on Mental Health (2006-2011)
- identifies specific issues, gaps and shortfalls for further consideration by the Inquiry
- makes recommendations in relation to issues, gaps and shortfalls.

Background and Context

In March 2006 following a significant consultation process across all states and territories, the Australian Senate Select Committee on Mental Health presented its report *A National Approach to Mental Health – From Crisis to Community*.

That report highlighted the urgent need for mental health reform in Australia with key directions including increased mental health funding, community based services, promotion, prevention and early intervention services, monitoring and accountability processes and consumer and carer advocacy. South Australian mental health consumers, carers and families, government and non-government sectors and the community contributed to the report.

Recognising the significance of mental health issues for the Australian community and informed by the Senate report, the COAG released the National Action Plan on Mental Health 2006–2011 in July 2006. The Plan provides a strategic framework emphasising greater coordination and collaboration between government, non-government and private providers in order to develop and deliver a more seamless and connected system of care.

In particular, it aims to improve mental health and recovery from mental illness through a greater focus on promotion, prevention and early intervention; enhance access to mental health services and increase access to accommodation and support and social, recreational and employment opportunities.

The Australian Government has allocated \$1.9 billion over five years as part of the COAG package with each state and territory contributing a range of additional funded initiatives.

South Australia's Mental Health Reform Agenda

The South Australian Government has increased spending on mental health service programs from approximately \$146 million in 2001-02 to over \$200 million in 2006-07. In addition, a one-off allocation of \$25 million was also made for the provision of non-government mental health services, including psychosocial rehabilitation packages, shared care initiatives, group rehabilitation and respite initiatives.

South Australia's initial contribution to the mental health COAG initiatives was \$116.2 million over four years but additional funding shortly after increased this figure to \$116.9 million. This expenditure covers the COAG priority areas of promotion, prevention and early intervention, service integration and community participation and aligns with the thrust of the recommendations of the *National Approach to Mental Health – From Crisis to Community* report.

In August 2005, the Premier of South Australia sought advice from South Australia's Social Inclusion Board on reforming the South Australian mental health system in order to achieve improved outcomes for people with mental health issues, their families and carers.

Extensive consultation was undertaken with over 1400 key stakeholders including consumers, carers, advocacy groups, professional associations, industrial organisations, non-government organisations and government departments.

A number of other wide ranging inquiries and national developments also informed the philosophy and direction of the Board's advice including:

- Mental Health Council of Australia, the Human Rights and Equal Opportunity Commission and Brain and Mind research Institute *Not for Service* report (August 2005) which highlighted critical themes from a user perspective.
- National Mental Health Report (2005) provided a ten year review of trends of the First and Second National Mental Health Plans.
- Senate Select Committee on Mental Health *A National Approach to Mental Health – From Crisis to Community* report (July 2006).
- The COAG *National Action Plan for Mental Health 2006-2011* which emphasised the need for coordination, collaboration and a seamless system of care.
- The Bidmeade report (2005) which underpins the review and reform of South Australia's mental health legislation.

In February 2007, the Social Inclusion Board's *Stepping Up: A Social Inclusion Action Plan for Mental Health Reform 2007–2012* was released (see copy attached, plus the report is available on the web at: http://www.socialinclusion.sa.gov.au/files/Stepping_Up_mental_health_action_plan.pdf)

Based on its investigations, the Social Inclusion Board's report makes 41 recommendations. The recommendations focus on:

- implementing a stepped system of care with community mental health teams at the centre
- developing a targeted response for approximately 800 people with chronic and complex needs to ensure priority access to services
- aligning the South Australian mental health system with the COAG National Action Plan on Mental Health 2006-2011
- redeveloping the Glenside Hospital Campus as a centre for specialist mental health services.

At the core of South Australian mental health reform is a stepped model of care. Services will be organised as a range of steps from the least to the most intensive. This continuum of care will provide people with the appropriate level of support when they need it in the communities where they live. The stepped model of care continuum (from the least to the most intensive) includes:

- *Support Across the Community* provides for community support for people with mental illness through rehabilitation packages, day programs, respite places and other support services to keep people well where they live as well as providing increased access to community-based mental health clinical services through the establishment of six Community Mental Health centres across metropolitan Adelaide.
- *24 Hour Supported Accommodation* provides congregate accommodation with support and supervision provided on site 24 hours per day.
- *Community Recovery Centres* provide supported transitional accommodation for up to 6 months to people who will return to independent living.
- *Intermediate Care* provides supported accommodation to people who are becoming unwell or people with a mental illness who are leaving hospital but still need support before returning home.
- *Adult Acute Inpatient Care* across the mental health system including new state-of-the-art facilities.
- *Secure Care*.

South Australia's Progress in Mental Health Reform

Stepping Up: SA Government's Mental Health Reform Agenda

In response to the Social Inclusion Board's *Stepping Up: A Social Inclusion Action Plan for Mental Health Reform 2007-2012* and on top of the initial South Australia commitments to COAG, the State Government announced on 20 February 2007, a five year funding injection of \$43.6 million into mental health reform in South Australia.

This funding aligns with the thrust of the COAG National Action Plan on Mental Health 2006-2011 initiatives and the Select Committee on Mental Health's recommendations as outlined in its report *A National Approach to Mental Health – From Crisis to Community*. It includes:

- \$18.2 million for 90 new intermediate care beds, 60 at four centres across Adelaide and 30 in country hospitals
- \$20.46 million for 73 more 24 hour supported accommodation beds across Adelaide
- \$1.84 million to allow a smooth change over between the current system and the new five steps
- \$1.47 million to provide priority access to services for about 800 people with chronic and complex needs, including those who have drug and alcohol problems, a history of homelessness or who may be involved in the criminal justice system
- \$1.6 million for eight mental health nurse practitioners for regional areas over the next four years.

The 2007-08 State Budget provided a further \$50.5 million over four years for mental health reform and included:

- \$36.8 million for non-clinical community based support services delivered through non-government organisations
- \$1.6 million for an early intervention outreach service for young people with a mental illness
- \$12.08 million to commence construction of six community mental health centres across the metropolitan area with a further \$13.84 million provided in the forward capital program to complete these centres at a total cost of \$25.9 million.

South Australia has also been able to utilise some of the \$21 million received from the Australian Government under the current Australian Health Care Agreement for projects focussing on the care and services provided to support transition from hospital to home to assist in the mental health reform agenda. This funding provided a timely opportunity to address key mental health service priorities for South Australia. The mental health service priorities supported through this funding have been on the facility based components of the stepped system of care from acute services through to support in the community and returning to home.

Pathways Home funding totalling approximately \$12 million in capital has enabled the development of three mental health community rehabilitation centres in the northern metropolitan, southern metropolitan and central Adelaide areas. These centres are residential facilities which provide step down services from acute and intermediate care.

Support is provided by trained and experienced on-site staff and the length of stay is expected to be between three to six months duration. The central Adelaide facility was recently completed and the northern and southern sites will be completed in this financial year. These three facilities will significantly increase the capacity of community based mental health rehabilitation services for South Australia.

Recurrent costs for staffing and administration of these community rehabilitation centres are being funded by the State Government.

A comprehensive implementation plan is being finalised by the South Australian Department of Health in response to the recommendations of the Social Inclusion Board's *Stepping Up* report and will be released soon.

A number of key cross government strategic partnerships have been established as part of the Social Inclusion Board's work on South Australian mental health reform. These are:

- Education, Employment and Training and Mental Health
- Drug and Alcohol, General Health and Mental Health
- Child and Adolescent Psychological Wellbeing
- Housing, Social Care, Aged Care and Mental Health
- Justice and Mental Health.

There are also a number of formalised key strategic partnerships and alliances that have been established. These include:

- Interagency CHES (Child health, education and support services) Alliance-statement of collaborative intent between the Department of Education and Children's Services, Department of Health, Department for Families and Communities and South Australian Children's Care and Education Forum. This interagency alliance works collaboratively on issues relating to policy development, information, training, research, service pathways and education services.
- Memorandum of Understanding between Department for Housing and Department of Health (Mental Health) for the coordinated delivery of mental health, support and housing services to enhance the wellbeing and improve housing outcomes for people with mental illness (February 2007).
- Memorandum of Understanding between the Department for Families and Communities and the Department of Health for the management and the delivery of services to children and families involved in the child protection system (December 2004).

The development of interagency planning, collaboration and coordination is critical to the success in achieving the aims of the National Action Plan. Housing, employment, education, child protection, youth justice, ageing, Aboriginal and disability services provide critical services to people with a mental health illness. Coordinating the interfaces and ensuring effective use of resources across many providers is necessary, and this includes the critical role of non-government community based services. Developing workforce capacity across all portfolios and agencies to enable

the effective support and assistance to people with a mental health illness is a vital component as is an integrated approach to service delivery.

South Australia's progress on the COAG National Action Plan

South Australia has also made some significant progress on its contribution to the COAG National Action Plan on Mental Health 2006–2011. Some key achievements are:

- Promoting Mental Health

The South Australian Government has signed an agreement with the national depression initiative *beyondblue*, to promote psychological wellbeing and reduce psychological distress in the South Australian community. This collaboration provides promotion and prevention strategies, enhances professional training, commissions and supports research and promotes partnerships across health and other sectors. Funding of \$1.1 million is being provided over four years and the contract was signed on 8 September 2006.

- Early Intervention with Young People Initiative

Intervening early with children and young people is pivotal for health and wellbeing and prevention of long-term social, health and economic impacts of mental illness. The 'Healthy Young Minds' program provides 20 additional community outreach workers in Child and Adolescent Mental Health Services, plus three psychiatrists to improve and expand therapy services in areas of high demand. 11.5 fulltime equivalent staff will have been employed under this program by the end of June 2007. The remaining positions will be filled over the next three years. Country mental health services will be increased by nine health professionals over the life of the initiative. Funding of \$8.3 million is being provided over four years.

- Shared Care with General Practitioners (GPs) Initiative

This initiative will provide 30 allied health professionals such as psychologists, occupational therapists, nurse practitioners and social workers to work with General Practitioners in private practice. A start up phase contract has been signed with the South Australian Division of General Practice and positions have been advertised. Country mental health services will be increased by 14 mental health professionals over the life of the program. Funding of \$9 million is being provided over four years. Services will commence in July 2007.

- Improving Services to People with Mental Illness and Drug and Alcohol Issues

The Healthy Young Minds initiative has also funded two specialist mental health workers and a Consultant Psychiatrist to provide an outreach service for adolescents with both mental illness and substance abuse problems. The Consultant Psychiatrist position has been filled and the specialist mental health worker positions are in the process of being appointed. Funding of \$1.4 million is being provided over four years for these positions, with one position for country mental health.

- Workforce Initiatives

Over 100 new positions have been filled that are providing services in the following areas:

- Increased services in country areas such as Child and Adolescent Mental Health Service workers, psychosocial rehabilitation programs, extended emergency triage and liaison services;
- Extra support for Aboriginal and Torres Strait Islander people through outreach programs, residential rehabilitation programs, peer support and the like;
- Employment and training of peer support workers and carer consultants;
- Improving access to acute and community-based services. Examples include discharge follow-up, extra nurses for assertive care, youth mobile outreach, and expansion of Assessment and Crisis Intervention Services; and
- Enhancing Emergency Department responses through actions such as additional mental health nurses in Emergency Departments.

It is evident from the above that the direction of South Australia's mental health reform agenda and progress made is clearly on track with the recommendations of the Australian Senate Select Committee on Mental Health report *A National Approach to Mental Health – From Crisis to Community*. For example, Recommendation 13 highlights '*Further recommendations for State and Territory government action*'.

Some of these recommendations include:

- establish more respite and step up/step down accommodation options
- provide long-stay inpatient facilities with a focus on rehabilitation
- establish more longer term supported, community-based housing for people with mental illness with links to clinical centres for support
- establish more inpatient facilities for people with dual diagnosis
- increase levels of consumer involvement in mental health services.

These recommendations align closely with the recommendations of the *Stepping Up: A Social Inclusion Action Plan for Mental Health Reform 2007-2012*.

SPECIFIC ISSUES, GAPS AND SHORTFALLS FOR CONSIDERATION BY THE INQUIRY

Allocation of Australian Government's Mental Health Reform Funding

The Australian Government has committed \$1.9 billion over five years to its mental health reform package as part of the COAG National Action Plan on Mental Health (2006–2011).

The Australian Government's Department of Health and Ageing (DoHA) is the responsible lead agency for the delivery of 14 of the 18 initiatives with the Department of Family, Community Services and Indigenous Affairs (FaCSIA), the Department of Employment and Workplace Relations (DEWAR) and the Department of Education, Science and Training (DEST) having responsibility for implementing the remainder of the initiatives.

The funding provided under the Australian Government's package is for the delivery of Australian Government programs within jurisdictions. Funding is not being provided directly to states and territories and final decision making in relation to programs rests with the Australian Government.

There is no set funding formula for the allocation of Australian Government funding to states and territories. For example:

- Some initiatives such as DoHA's Better Access to psychiatrists, psychologists and GPs through MBS item numbers are demand driven.
- The DoHA Support for Day-to-Day Living in the Community Program are being implemented in consultation with jurisdiction based Commonwealth/State- COAG Mental Health groups.
- The FaCSIA Personal Helpers and Mentors Program funding is determined by location (metropolitan or non metropolitan). The jurisdiction based Commonwealth/State - COAG Mental Health groups assist in the identification of sites.
- The FaCSIA Respite Care Program funding is allocated through Commonwealth Respite and Carelink Centres of which there are four in South Australia.

Given the diversity of approach in the allocation of funding, the challenge for the Australian Government will be to ensure that all people experiencing mental health issues across Australia whether living in metropolitan, rural or remote areas have equal access to and are able to benefit from the Australian Government's mental health reform package.

Recommendation One:

A funding formula be implemented by the Australian Government in relation to the COAG National Action Plan on Mental Health 2006-2011 initiatives to ensure equitable distribution of resources across all states and territories.

Coordination, Collaboration and Decision Making

A key emphasis of the COAG National Action Plan for Mental Health 2006-2011 strategic framework is enhancing coordination and collaboration between government, non-government and private providers in order to develop and deliver a more seamless and connected system of care.

With the considerable development and implementation of mental health reform initiatives at this time at both federal and state levels, a continuing focus on collaboration, partnership and joint decision making between the Australian Government, states and territories will ensure a coordinated system of mental health care and the minimisation of fragmentation and duplication of services.

For example, the South Australian Department of Health and the South Australian Department for Families and Communities have been working in partnership to establish a coordinated statewide system of community-based psychosocial

rehabilitation and support services for people with mental illness and psychiatric disability.

As some of the Australian Government's new initiatives also relate to psychosocial rehabilitation, it is important that the Australian Government is part of this strategic partnership to ensure that South Australian mental health consumers, their carers and families have access to a coordinated system of care.

At a service delivery level, partnership arrangements of clinical service providers, psychosocial rehabilitation and support providers and housing providers have been established across both metropolitan and country regions as part of the Department for Families and Communities Supported Accommodation Demonstration Projects.

It is important that the new initiatives funded by the Australian Government are willing and able to participate in existing South Australian partnership arrangements in order to enhance coordination. The care coordination model being developed by the Australian Government as part of the COAG National Action Plan on Mental Health 2006-2011 should align with existing South Australian evidence-based practice models.

Strong coordination mechanisms and partnership arrangements are therefore required at a strategic and operational level in order to maximise recovery outcomes for mental health consumers, families and carers, minimise unmet need and ensure that mental health consumers do not fall through the gaps.

It is critical that coordination and partnership arrangements are complimented by a comprehensive monitoring, evaluation and reporting processes. Such a framework will enable continuous improvement to the plan and highlight gaps and issues in implementation. It will also assist in highlighting access and equity issues.

Recommendation Two:

Strong coordination mechanisms and partnership arrangements between the Australian Government and jurisdictions and across areas within jurisdictions need to be developed and implemented at a strategic and operational level in order to maximise recovery outcomes for mental health consumers, families and carers, minimise unmet need and ensure that people with mental health issues do not fall through the gaps.

Recommendation Three:

Comprehensive monitoring, evaluation and reporting systems and processes be developed and implemented to ensure that the aims and objectives of the national strategic mental health framework are met.

Promotion, Prevention and Early Intervention

Increasing evidence drawn from international studies demonstrates that the promotion of good mental health, the prevention of illness and intervening early in mental illness and related problems can markedly reduce the economic, social and personal burden commonly associated with mental illness.

A population health approach to mental health recognises that health and illness results from a complex interplay between biological, social, cultural, economic, psychological and political factors. Traditionally mental health systems have been responsive to the 'individual' who is already experiencing distress or illness whereas a population health approach to mental health recognises the importance of promoting mental health, preventing mental illness and earlier intervention using approaches that target individual, groups and whole population groups.

A population health perspective is well recognised and supported as an approach in previous mental health publications including the *National Action Plan for Promotion, Prevention and Early Intervention for Mental Health 2000* and *National Mental Health Plan 2003-2008*.

A continued focus on engaging the broader population and recognising the impact of social and economic disadvantage remain key features of South Australia's reform of mental health. Current interventions are aimed at increasing the mental health literacy of the general population through initiatives such as *Mental Health First Aid*; increasing awareness and help seeking behaviours through the South Australian Government's partnership with *beyondblue* and the potential development of a population based mental health campaign.

South Australia recognises the importance of ongoing effort in these areas and is committed to reducing psychological distress across the South Australian population. This is evidenced by the inclusion of "*improving psychological wellbeing*" as one of several health targets in South Australia's Strategic Plan.

There is clearly significant work that still needs to be done in the area of promotion, prevention and early intervention. It is recommended that this work includes:

- Building capacity through workforce development
Develop the ongoing skills and knowledge of the South Australian mental health workforce through the adoption of the National Mental Health Strategy *National Practice Standards for the Mental Health Workforce 2002* with a particular focus on promotion and prevention.
- Promoting the early years
Develop a health literacy 'lens' that can be cast over all South Australian early intervention strategies that include Children's Centres for Early Childhood and Parenting. The 'lens' would contain current information on promoting awareness of the importance of the early years as a critical developmental stage and the importance of intervening early with evidence based approaches. The 'lens' would provide a developmental tool in developing the health literacy of the South Australian workforce.
- Developing strong and resilient populations
Develop and support evidence-based approaches and interventions that promote resilience in individuals, families and communities and aim to protect against risk factors and adverse life events. These approaches can be used across the continuum from the broader South Australian population perspective to people with acute and severe and persistent mental illness.

Recommendation Four:

Mental health promotion using a population based approach be targeted for further consideration as part of the mental health reform agenda in particular in the areas of building strong and resilient communities, promoting early years literacy and workforce development

Workforce Recruitment, Retention and Quality

Recruitment and retention of mental health professionals is an issue that challenges all mental health jurisdictions, both nationally and overseas. Increasing workforce capacity, ensuring an appropriately skilled workforce and ensuring long-term workforce retention and sustainability are key issues for the Australian and South Australian Governments across both government and non-government mental health sectors.

There are already serious workforce shortages across all mental health professional groups. We need to continue to develop recruitment and retention strategies to ensure an available workforce that will sustain South Australia into the future.

The South Australian Social Inclusion Board's *Stepping Up* report has highlighted the need for short, medium and long-term workforce plans. Work on the first of these plans is already underway and will be coordinated across government and non-government sectors.

Some work has already been undertaken to develop and implement a range of recruitment strategies including establishment of new roles such as nurse practitioners and negotiations with public psychologists to establish private practice arrangements. Retention of skilled mental health sector staff is critical for longer term sustainability.

The establishment of workforce capacity and infrastructure that supports the development and enhancement of all mental health workers and professional groups in both the government and non-government mental health sectors is imperative. This infrastructure would be focussed on establishing healthy workplace environments and cultures and would include:

- induction and orientation processes
- provision of supervision and mentoring
- skills development programs
- performance review and development planning
- practice reflection, discussion and debate
- professional partnerships and relationships building.

National Mental Health Strategy *National Practice Standards for the Mental Health Workforce 2002* can be used as a tool to support recruitment and retention strategies and ensure an appropriately skilled mental health workforce. Although the Practice Standards were developed in 2002 as part of the National Mental Health Strategy, they have never been implemented.

Recommendation Five:

Workforce infrastructure that supports the development and enhancement of all government and non-government mental health workers and professional groups be developed and implemented as part of a workforce retention strategy.

Recommendation Six:

The National Mental Health Strategy *National Practice Standards for the Mental Health Workforce 2002* be reviewed and implemented

Addressing the Needs of Specific Population Groups

Culturally and Linguistically Diverse Populations

Although the Australian Government's mental health reform package addresses the issues of culturally and linguistically diverse populations to some degree (such as the Community-Based Programmes to Help Families Coping with Mental Illness \$45.2 million over five years), there is a need for further consideration of this population group.

A comprehensive implementation plan has been developed for the *Framework for the Implementation of the National Mental Health Plan 2003-2008 in Multicultural Australia*. The implementation plan is managed by Multicultural Mental Health Australia with a formal mechanism for all jurisdictions to contribute to national priority setting. Consideration should be given to ensure that any new initiatives targeting culturally and linguistically diverse populations include funding for developing an appropriate strategy with the relevant community, use of interpreters and evaluation.

Recommendation Seven:

New initiatives targeting Culturally and Linguistically Diverse (CALD) populations should include funding for developing an appropriate strategy with the relevant community, the use of interpreters and evaluation.

Children and Young People

- *Children and young people at risk*

Parental mental illness is a significant contributing factor to children entering out-of-home care. A study into placement histories and outcomes for children aged under two entering the alternative care system in South Australia between 2000 and 2005 identified that parental mental illness was a significant contributing factor in over a third of these children's entry to care. Programs aimed at helping parents to obtain better and faster access to a range of clinical and supportive services can minimise the need for children to be removed from their parents care or lessen the time the children are away from their parents.

Although specific statistics on the numbers of children in South Australia who have a parent with a mental illness are not collected, a Statewide audit of registered mental health consumers aged between 18 and 64 years undertaken by the South Australian Department for Families and Communities in 2006 indicates that 24% of South Australian adult mental health consumers have children under 18 years with 57% of consumers having significant responsibility for the care of at least one of the children.

These consumers are predominantly female (75%) with the majority aged between 25 and 44 years (75%). 13% of these consumers have an Aboriginal or Torres Strait Islander background.

South Australian programs found to be effective include:

- the placement of mental health workers in child protection agencies (Aberfoyle Park District Centre Mental Health Liaison Service)
- the placement of Families SA worker in health services (Nunkuwarrin Yunti Aboriginal Health Centre).

- *Access to psychosocial rehabilitation services*

It has been identified that young people with mental health issues require greater access to psychosocial rehabilitation and disability support services. Consideration should be given to providing young people with greater access to the COAG Personal Helpers and Mentors program.

- *Youth in the justice system*

It has been identified that young people with mental health issues who are at risk of becoming involved or are already involved with the justice system have a particular range of needs that should be addressed and are often falling through the gaps of the system. Consideration should be given to addressing the specific needs of young people with forensic mental health issues.

Recommendation Eight:

A program be developed and implemented to support parents with mental illness and their children in order to minimise the need for children to be placed in out-of-home alternative care.

Recommendation Nine:

The access criteria for COAG psychosocial rehabilitation and support programs such as the Personal Helpers and Mentors program be broadened to include young people.

Recommendation Ten:

Specific focus be given to the need of young people with forensic mental health issues.