Appendix 3: Highlights regarding progress of actions under the *Fourth National Mental Health Plan*

Table A3-1
Highlights of actions under Priority area 1 – Social inclusion and recovery

Action		Summary of highlights of progress
2	Coordinate the health, education and employment sectors to expand supported education, employment and vocational programs which are linked to mental health programs.	Stocktake of supported employment and education activities: A national stocktake of existing supported employment and education activities that are linked to mental health programs is being finalised.
4	Adopt a recovery oriented culture within mental health services, underpinned by appropriate values and service models.	National Mental Health Recovery Framework: A project to develop a National Mental Health Recovery Framework is being finalised. The Framework is intended to support implementation of recovery oriented culture in all mental health services. National Recovery Forum: An inaugural National Recovery Forum was held in June 2012. Three international experts gave keynote addresses. This enabled exchange about the implementation of a recovery oriented culture, and provided an opportunity to promote the development of the National Mental Health Recovery Framework.
5	Develop integrated programs between mental health support services and housing agencies to provide tailored assistance to people with mental illness and mental health problems living in the community.	Intersectoral linkages: The implementation of Actions 5 and 6 has been combined as a single process. An implementation approach has been endorsed and a Working Group was established in early 2013.
6	Develop integrated approaches between housing, justice, community and aged care sectors to facilitate access to mental health programs for people at risk of homelessness and other forms of disadvantage.	Intersectoral linkages: The implementation of Actions 5 and 6 has been combined as a single process. An implementation approach has been endorsed and a Working Group was established in early 2013.
7	Lead the development of coordinated actions to implement a renewed Aboriginal and Torres Strait Islander Social and Emotional Wellbeing Framework.	Renewal of the Aboriginal and Torres Strait Islander Social and Emotional Wellbeing Framework: A Working Group was established in March 2012 and a request for tender issued to engage a contractor to work with the Working Group to renew the Aboriginal and Torres Strait Islander Social Emotional Wellbeing Framework. The Working Group has begun to review the previous framework to identify gaps, achievements and changes that should be considered in renewing the Framework. A discussion paper will be developed and jurisdictional consultations will occur.

Table A3-2 Highlights of actions under Priority area 2 – Prevention and early intervention

Action		Summary of highlights of progress
9	Implement targeted prevention and early intervention programs for children and their families through partnerships between mental health, maternal and child health services, schools and other related organisations.	Mapping child mental health services: Work has commenced to progress the mapping of existing child mental health services and to identify existing links and possible gaps in the service provision.
10	Expand community based youth mental health services which are accessible and combine primary health care, mental health and alcohol and other drug services.	headspace: Funding was provided in the 2011-12 Federal Budget for 90 fully sustainable headspace sites across Australia by 2014-15. 70 sites have been announced, and 40 are currently operational. When fully established, these sites will help up to 72,000 young people each year.
11	Implement evidence based and cost effective models of intervention for early psychosis in young people to provide broader national coverage.	Early psychosis youth centres: In addition to the expansion of the headspace program (see above), the 2011-12 Federal Budget also allocated \$222.4 million over five years for up to 12 early psychosis youth centres across the country, based on the Early Psychosis Prevention and Intervention Centre model. This builds on a 2010-11 Budget measure that provided \$25.5 million over four years to establish up to four sites, bringing the total number of sites to be funded to 16.

Action		Summary of highlights of progress
12	Provide education about mental health and suicide prevention to front line workers in emergency, welfare and associated sectors.	Review of the National Suicide Prevention Working Group: In May 2012, the Mental Health Standing Committee agreed to review the terms of reference, role and membership of the National Suicide Prevention Working Group, with a view to determining its capacity to progress this action and providing it with direction on priorities for the next 12 months. The National Suicide Prevention Working Group's last meeting was held in October 2012. This action now sits under the remit of the Mental Health Drug and Alcohol Principal Committee.
13	Coordinate state, territory and Australian Government suicide prevention activities through a nationally agreed suicide prevention framework to improve efforts to identify people at risk of suicide and improve the effectiveness of services and support available to them.	Overarching framework for suicide prevention activity: In September 2011, the Living Is For Everyone (LIFE) Framework was endorsed by the Australian Health Ministers Advisory Council as the national overarching framework for suicide prevention activity in Australia. The LIFE Framework provides evidence based priorities, actions and strategies for suicide prevention in Australia.

Table A3-3
Highlights of actions under Priority area 3 – Service access, coordination and continuity of care

Action	1	Summary of highlights of progress
16	Develop a national service planning framework that establishes targets for the mix and level of the full range of mental health services, backed by innovative funding models.	National Mental Health Service Planning Framework: A project to develop a National Mental Health Service Planning Framework (NMHSPF) commenced in 2011 and is expected to be completed in 2013. Expert working groups comprising service providers, researchers, consumers, carers and people with service planning expertise are informing the development and refinement of a classification of mental health service elements and packages of care.
22	Better target services and address service gaps through cooperative and innovative service models for the delivery of primary mental health care.	Resources for primary mental health care initiatives: The 2011-12 Federal Budget allocated resources to address service gaps in the delivery of primary mental health care, including doubling funding for the Access to Allied Psychological Services component of the Better Outcomes in Mental Health Care program, and providing new funding for the Partners in Recovery program.

Table A3-4 Highlights of actions under Priority area 4 – Quality improvement and innovation

Action		Summary of highlights of progress
23	Review the Mental Health Statement of Rights and Responsibilities.	Review of the Mental Health Statement of Rights and Responsibilities: Led by the Safety and Quality Partnership Subcommittee, a project to review the Mental Health Statement of Rights and Responsibilities commenced in the first half of 2011. Following national consultation processes, the revised Draft Statement was endorsed by Health Ministers in late 2012 and publicly released in early 2013.
24	Review and where necessary amend mental health and related legislation to support cross-border agreements and transfers of people under civil and forensic orders, and scope requirements for the development of nationally consistent mental health legislation.	Review of mental health and related legislation: A working group was formed and an implementation approach and work plan were endorsed but unable to be progressed due to capacity issues.

Action		Summary of highlights of progress
25	Develop and commence implementation of a National Mental Health Workforce Strategy that defines standardised workforce competencies and roles in clinical, community and peer support areas.	National Mental Health Workforce Strategy and Plan: The Mental Health Workforce Advisory Committee (MHWAC) progressed the development of the National Mental Health Workforce Strategy and an accompanying National Mental Health Workforce Plan which were endorsed by Australian Health Ministers in September 2011. The Strategy and Plan provide an overarching framework for the ongoing development of the mental health workforce in Australia. A national implementation strategy is currently being developed. National Practice Standards for the Mental Health Workforce: MHWAC and Health Workforce Australia commenced a project in early 2012 to review the National Practice Standards for the Mental Health Workforce and to develop mental health core competencies. It is expected that the review of the Practice Standards will be completed in 2013, but that the work on standardised mental health competencies will continue.
27	Ensure accreditation and reporting systems in health and community sectors incorporate the National Standards for Mental Health Services.	Mapping the National Safety and Quality Health Service Standards to the National Standards form Mental Health Services: In 2011, the Australian Commission on Safety and Quality in Healthcare (ACSQHC) and the Safety and Quality Partnership Subcommittee mapped the draft National Safety and Quality Health Service Standards (NSQHSS) to the National Standards for Mental Health Services (NSMHS). The work explored ways to facilitate a single review process that avoids duplication and satisfactorily meets both the NSQHSS and the NSMHS accreditation standards. Accreditation workbook: Collaborative work continued in 2012 on an accreditation workbook to enable mental health service organisations to focus their quality improvement activities within the NSQHSS and NSMHS frameworks. The workbook was made available for trailing and consultation purposes via the ACSQHC website in January 2013.
28	Further develop and progress implementation of the National Mental Health Performance and Benchmarking Frameworks.	Key Performance Indicators for Australian Mental Health Services: Ongoing review of the National Key Performance Indicators for Australian Mental Health Services resulted in a second edition being published in May 2011. The technical specifications of this edition are currently being reviewed and it is anticipated that a third edition will be published in 2013. The focus will remain on public sector mental health services, however, it is envisaged that continued data development over time will enable the National Mental Health Performance Framework to be utilised in the broader mental health sector. Fourth National Mental Health Plan Measurement Strategy: Extensive collaborative work to describe the underlying technical details of the 25 Fourth Plan indicators resulted in the publication of the Fourth National Mental Health Plan Measurement Strategy in May 2011. The Measurement Strategy provides a high-level overview of the indicators and targets (where appropriate), details on indicator specifications and planned developments. National support for benchmarking in Australian public mental health services: A range of concepts for nationally-coordinated benchmarking activities for specialised mental health service organisations are being considered. These include developing a data repository for the reporting of national benchmarks; and establishing online benchmarking forums for unique mental health services (across Australia) that have insufficient critical mass to create relevant peer groups for reviewing and comparing performance. Development of nationally consistent promotional material for use by states and territories: A series of 'non-technical' fact sheets is being developed to promote the national key performance indicators and the range of performance measurement information available to the mental health sector. It is anticipated that the first set of fact sheets will be available in 2013.

Action		Summary of highlights of progress
29	Develop a national mental health research strategy to drive collaboration and inform the research agenda.	Stocktake of mental health research efforts: A stocktake on current mental health research efforts was completed in mid-2012. National Health and Medical Research Council investment: The National Health and Medical Research Council (NHMRC) held two workshops on 'developing a more evidence-based mental health system' which informed the 2011-12 Federal Budget allocation of \$26.2 million over 5 years across three areas: (1) a targeted call for research focusing on prevention and early intervention in mental illness in children and young people; (2) three mental health centres of research excellence focusing on suicide prevention, substance abuse and better mental health planning; and (3) and the new John Cade Fellowship in Mental Health Research.
30	Expand and better utilise innovative approaches to service delivery including telephone and e-mental health services.	Mental health portal: The 2011-12 Federal Budget included funding for the development of a national mental health portal. Stage 1 of the portal – mindhealthconnect: your pathway to a healthy mind – was launched in July 2012 and provides access to a range of trusted, high quality online information and self-help programs from Australia's leading mental health organisations. The National Health Call Centre Network is hosting the portal. Continued development of the portal will examine the capability to refer to local services through the National Health Call Centre's services directory, along with other functionality. Stocktake of e-mental health activities: State and territory governments have also invested in e-mental health activities. A stocktake of e-mental health activities was undertaken in the first half of 2012, with the aim of informing decisions about further effective expansion and innovation of mental health services into the online environment.

Table A3-5 Highlights of actions under Priority area 5 – Accountability

Action	1	Summary of highlights of progress
31	Establish comprehensive, timely and regular national reporting on the progress of mental health reform which responds to the full range of stakeholder needs.	Fourth National Mental Health Plan Measurement Strategy: In May 2011, the first edition of the Fourth National Mental Health Plan Measurement Strategy which proposed data sources, specifications and targets for the Fourth Plan progress indicators was released. COAG National Action Plan on Mental Health Annual Progress Report: The Fourth Progress Report – covering implementation to 2009-2010 – was published in July 2012. Mental Health Services in Australia: The Australian Institute of Health and Welfare has sought to make this publication and the data that underlie it more readily accessible. An online version of the report was launched in October 2011 and repeated in October 2012, as was a summary snapshot of the key findings. The data were presented via a range of media, including an interactive data portal. National Mental Health Report: In June 2012, the revised outline
		and structure of future <i>National Mental Health Reports</i> was endorsed and work began on the production of the current report.
32	Build an accountable service delivery system that monitors its performance on service quality indicators and makes this information available to consumers and other stakeholders.	Public reporting: The Mental Health Information Strategy Standing Committee (MHISSC) established a Public Reporting Working Group to develop recommendations on how to implement the <i>Fourth Plan's</i> commitment to public reporting. In May 2011, a report for this group was finalised. The report included a literature review, recommendations regarding the introduction of public performance reporting by state and territory mental health services, and a broader consultation strategy.

Action	1	Summary of highlights of progress
33	Further develop mental health information, including national mental health data collections, that provide the foundation for system accountability and reporting.	Mental Health Non-Government Organisation Establishments National Minimum Data Set (MH NGOE NMDS) Project: In February 2011, the Australian Institute of Health and Welfare (AlHW) commenced the MH NGOE NMDS Project, which aims to collect nationally consistent information about the mental health NGO sector. The AlHW, in collaboration with the MH NGOE NMDS Working Group, developed draft specifications and data collection manual which includes a mental health NGO service taxonomy and definitions of service types in the taxonomy. The AlHW is now consulting with relevant funders to confirm that the MH NGOE NMDS is 'fit for purpose' and that jurisdictions are able to map their MH NGO activities to the NGO service taxonomy. Development of a carer (family inclusiveness) measure: The
		Australian Mental Health Outcomes and Classification Network (AMHOCN) commenced work to develop a measure of carers' experiences of the family inclusiveness of mental health care. A literature review identified that the carer version of the Victorian Consumer and Carer Experiences Questionnaires (C&CEQ) was suitable for trialing but required some modification. AMHOCN's next step is to modify the C&CEQ and pilot the revised measure.
		Development of the Living in the Community Questionnaire: AMHOCN, in collaboration with a Technical Advisory Group, commenced work to develop a consumer self-report measure that focuses on the social inclusion aspects of recovery. A draft of instrument known as the Living in the Community Questionnaire (LCQ) was produced and underwent 'proof of concept' testing during 2011. Further development of the LCQ occurred on the basis of feedback in early 2012, and field trials of the latest instrument began in early 2013.
		Measuring consumers' experiences of their care: Under the auspices of the Mental Health Information Strategy Standing Committee (MHISSC), the Victorian Department of Health commenced work on a project to develop a national mental health Consumer Experiences of Care (CEoC) tool, to measure the degree to which consumers are involved and engaged in their care as well as the quality of that care. A draft CEoC tool has been completed and a national 'proof of concept' trial and an evaluation of the tool were completed in the second half of 2012. Further work to test the reliability of the instrument was completed in June 2013.
		Mental Health Intervention Classification: The AIHW developed and conducted a pilot study of a mental health interventions classification to be used in specialist mental health services. The classification was endorsed by MHISSC for voluntary implementation by jurisdictions.
		Review of the National Outcomes and Casemix Collection (NOCC): A review of the data collected by Australian public sector mental health services under NOCC commenced in 2012. Known as the NOCC Strategic Directions 2014-24 Project, this review will document the implementation of NOCC to date and develop recommendations for further development of NOCC.
34	Conduct a rigorous evaluation of the Fourth National Mental Health Plan.	Evaluation Framework for the Fourth National Mental Health Plan: An external contractor was funded to develop an evaluation framework for the evaluation of the Fourth Plan.