



Government of Western Australia
Mental Health Commission

Young People's Mental Health and Alcohol and Other Drug Use: Priorities for Action 2020-2025

Report on Implementation 2021



**This resource was prepared by:**

Mental Health Commission
GPO Box X2299
Perth Business Centre WA 6847

Acknowledgement of Country

The Mental Health Commission acknowledges Aboriginal people as the Traditional Custodians of our State and its waters. The Mental Health Commission wishes to pay its respects to Elders both past and present and extend this to all Aboriginal and Torres Strait Islander peoples seeing this message.

Acknowledgement of Lived Experience

The Mental Health Commission acknowledges the individual and collective expertise of those with a living or lived experience of mental health, alcohol and other drug issues. We recognise their vital contribution at all levels and value the courage of those who share this unique perspective for the purpose of learning and growing together to achieve better outcomes for all.

The Mental Health Commission would in particular like to acknowledge young people with lived experience of mental health and alcohol and other drug-related issues, together with their families and carers, who contributed to the Young People's Mental Health and Alcohol and Other Drug Use: Priorities for Action 2020-2025 and this report on implementation.

Copyright

This work is copyright. It may be reproduced in whole or in part for study or training purposes subject to an acknowledgement to the Mental Health Commission. Reproduction for purposes other than those above requires written permission of the Mental Health Commission.

Suggested citation:

Mental Health Commission (2021). Young People's Mental Health and Alcohol and Other Drug Use: Priorities for Action 2020-2025, Report on Implementation. Mental Health Commission, Government of Western Australia.

Young people's artwork

All artwork featured in this document has been provided by Western Australian young people. Contributed artworks from Armadale and Bunbury High Schools and Project Elevation, organised by Zac Cawdron (he/him, 21) to promote art addressing mental health @gebz.996

Photography

Photography by Skyler Slate @skazzaslazza for YACWA, photographs taken at YPPA youth engagement events on 30 September and 1 October 2021.

Disclaimer

The information in this document has been included in good faith and is based on sources believed to be reliable and accurate at the time the document was developed. While every effort has been made to ensure that the information contained within is accurate and up to date, the Mental Health Commission and the State of Western Australia do not accept liability or responsibility for the content of the document or for any consequences arising from its use.

All quotes by young people in this document are sourced from: Youth Affairs Council of Western Australia (2021). Young People's Priorities for Action: Mental Health, Alcohol and Other Drugs Youth Engagements Summary Report: November 2021 unless otherwise cited.

Where quotes have been provided, these have not been altered, and are reflected in the true voice of the individual(s). It is acknowledged that the Mental Health Commission may not use some of the language and terminology as portrayed in these quotes, however, it is important that the voice of consumers and carers is reflected accurately.

Table of contents

| | |
|--|----|
| Minister's Foreword | 4 |
| Commissioner's Foreword | 5 |
| Youth Steering Group Foreword | 6 |
| 1. Overview of the YPPA | 7 |
| 1.2 Purpose of the YPPA Report on Implementation | 11 |
| 1.3 Key Statistics | 12 |
| 2. Partnering With Young People | 15 |
| 2.1 What we Heard | 16 |
| 3. YPPA Actions Progress Update | 25 |
| 4. Governance and Reporting | 81 |
| Other References | 85 |



Minister's Foreword

As Minister for Mental Health, I am profoundly invested in the mental health and wellbeing of young people in Western Australia and am dedicated to ensuring they experience minimal harm from alcohol and other drugs.

In December 2020 we launched the Young People's Mental Health and Alcohol and Other Drug Use: Priorities for Action 2020-2025 (YPPA) which is guiding the necessary system wide change to the provision of youth mental health and alcohol and other drugs services. The YPPA provides a clear way forward for the State Government, the Mental Health Commission and other agencies, the mental health and alcohol and other drug (AOD) sector, and other stakeholders across the community.

This Report on Implementation has been developed as an across-government commitment, where State Government agencies and other key stakeholders including young people, their families and carers have been engaged to support the delivery of the YPPA. The YPPA Report on Implementation provides an update on the progress made since the launch of the YPPA and identifies which State Government agencies are currently implementing the YPPA's Immediate Actions and those Top Priorities and Future Steps that have been progressed to date.

I would like to acknowledge the outstanding contribution made by young people across Western Australia who have helped inform this Report on Implementation, in particular the YPPA Youth Steering Group. I am grateful we have such passionate and informed advocates for change.

I am very pleased to release the YPPA Report on Implementation which will guide our continued commitment to a coordinated approach to improving mental health and AOD outcomes for young people in Western Australia.

Hon Amber-Jade Sanderson MLA
Minister for Health; Mental Health



Commissioner's Foreword

I am pleased to release the YPPA Report on Implementation – the next step in the Mental Health Commission's ongoing commitment to partnering across Government, the sector and the wider community to drive real change in the mental health and Alcohol and Other Drug sector and provide better outcomes for Western Australia's young people.

The YPPA Report on Implementation provides an important update on the progress of the YPPA actions and demonstrates what work is currently being undertaken to support the mental health and wellbeing of young people. The mechanisms we are putting in place to support accountability and to monitor and report on progress are also outlined.

Fundamental to the development of the YPPA Report on Implementation has been our engagement with young people and their carers. I would like to thank the YPPA Youth Steering Group for guiding the development of events where young people and other key stakeholders have come together to provide their advice.

I would like to thank the many Government agencies who assisted in the development of the YPPA Report on Implementation including the Mental Health Commission, and the Departments of Health, Education, Communities, Justice, Treasury, Local Government, Sport and Cultural Industries, Training and Workforce Development, the Premier and Cabinet, and the Western Australia Police Force.

I would also like to thank my colleagues across State Government, the Youth Mental Health Sub Network and the Youth Affairs Council of Western Australia for partnering with the Mental Health Commission.

We recognise everyone's contributions and value the courage of those who share their unique perspective for the purpose of learning and growing together to achieve better outcomes for all. We have listened, learned, and are committed to continuing to work together in the delivery of a person centred and evidence based mental health and alcohol and other drug system.

Jennifer McGrath
Mental Health Commissioner

Youth Steering Group Foreword

Our Youth Steering Group that guided this project was made up of a diverse group of young people with lived experience of mental health, alcohol and other drugs. As a group, we held very different and important experiences that meant we could represent a cross section of young people with a variety of voices and perspectives.

We looked at every part of the events and engagements from planning, selecting participants and facilitating many important discussions. A large part of our role was to do whatever we could to create safe and inclusive spaces for all folks involved with this project. This meant planning for anything that affected young people, creating welcome packs and working with the stakeholders to ensure that their approach was one that would allow young people to feel safe and empowered to share their ideas and thoughts. We considered everyone in our decision making, always trying to make sure that diversity was well represented as much as possible.

As a team, our vision is for a future where all young West Australians can understand mental health, know how to access the support they need, and

have services that recognise them as an individual who has specific and unique needs. Seeing the conversations, ideas and opportunities that came out of this project gives us hope that we can achieve this vision.

Our involvement in this process has been challenging and empowering at once. As a group of young people with lived experience of mental health, alcohol and other drug issues, it has been invaluable to have this opportunity to use our experiences to shape a better system for the future. We hope this Report on Implementation can begin to represent this change for other young people across Western Australia too - and that the involvement of young people does not stop here.

Youth Steering Group Members

- Amber Cane
- Lily Palmer
- Finlaey Hewlett
- Ray Gamble
- Isabella Choate
- Troy Wood
- Jake de Visser
- Zac Cawdron
- Kailin Guo
- Xavier Wileman



1. Overview of the Young People's Priorities for Action 2020-2025

On 16 December 2020, the Young People's Mental Health, Alcohol and Other Drug Use: Priorities for Action 2020-2025 (YPPA) was publicly launched.

The YPPA guides the State Government, the Mental Health Commission (MHC) and other agencies, the mental health and alcohol and other drug (AOD) sector, and other stakeholders across the community, in supporting and responding to the mental health and AOD needs of young people aged 12 to 24 years.

An update on implementation progress to date is provided on pages 25 to 79.

The YPPA consists of:

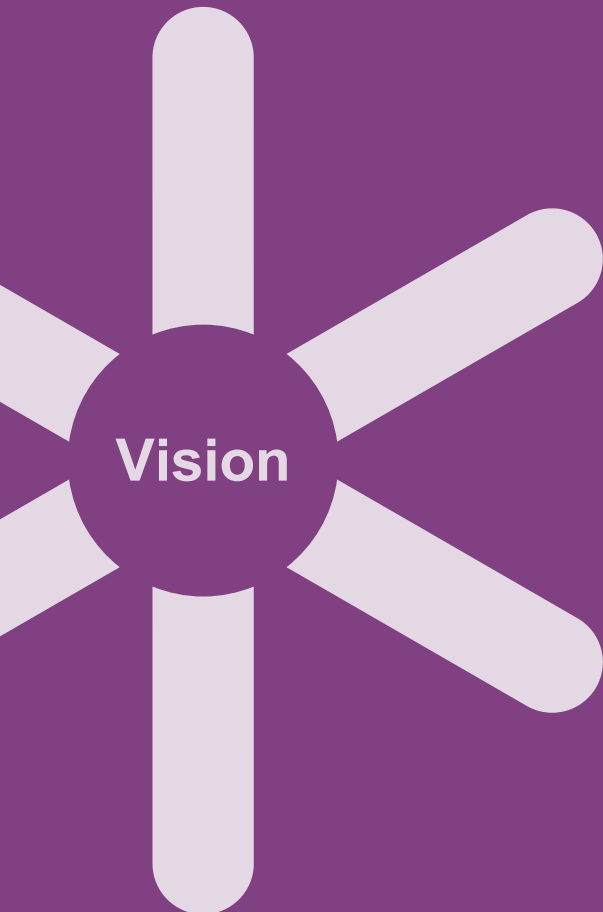
- **Immediate Actions (50 actions)** - Initiatives currently being implemented, within existing resources;
- **Top Priorities (77 actions)** - The first priorities for implementation should additional funding become available; and
- **Future Steps (14 actions)** - Longer term priorities for implementation into the future.

MHC is also working on other initiatives to identify the unique needs of people aged 0 to 11 years. This includes the Ministerial Taskforce into Public Mental Health Services for Infants, Children, and Adolescents aged 0-18 Years in Western Australia (the ICA Taskforce) which is currently reviewing public specialist mental health services for children and teens within this age group.



Katie Sheen, (she/her), 23

Young People's Priorities for Action 2020-2025



The vision of the YPPA is that young people are healthy and have fulfilling lives, where young people can learn, grow and contribute to society as they set up life within the community. Most importantly we want young people to be well and stay well.

“

We, as young people, all need support and education to help keep one another well and build our resilience. If we need services, we should be able to find them easily, with fewer wrong doors or long queues. We need services to work together, respect our differences, make us feel welcome, and treat us as equal partners.¹

”

¹ MHC, *Young People's Mental Health and Alcohol and Other Drug Use: Priorities for Action 2020-2025* (2020).



Strategies to implement the vision



1. Helping us stay well:

Promoting mental wellbeing, and intervening early to prevent mental health issues and alcohol and other drug related harm.



4. Valuing that we are all unique:

Diversity and culture is respected, nurtured and catered for at every point, ensuring services and workforces are welcoming, inclusive, culturally safe, person-centred and holistic.



2. Supported by our family and community:

Boosting whole of community and whole of family engagement, and support for families, loved ones and carers so they can go on supporting young people.



5. Services working together:

There is a partnership approach to recovery with better coordination and transition between and across sectors, services and life stages.



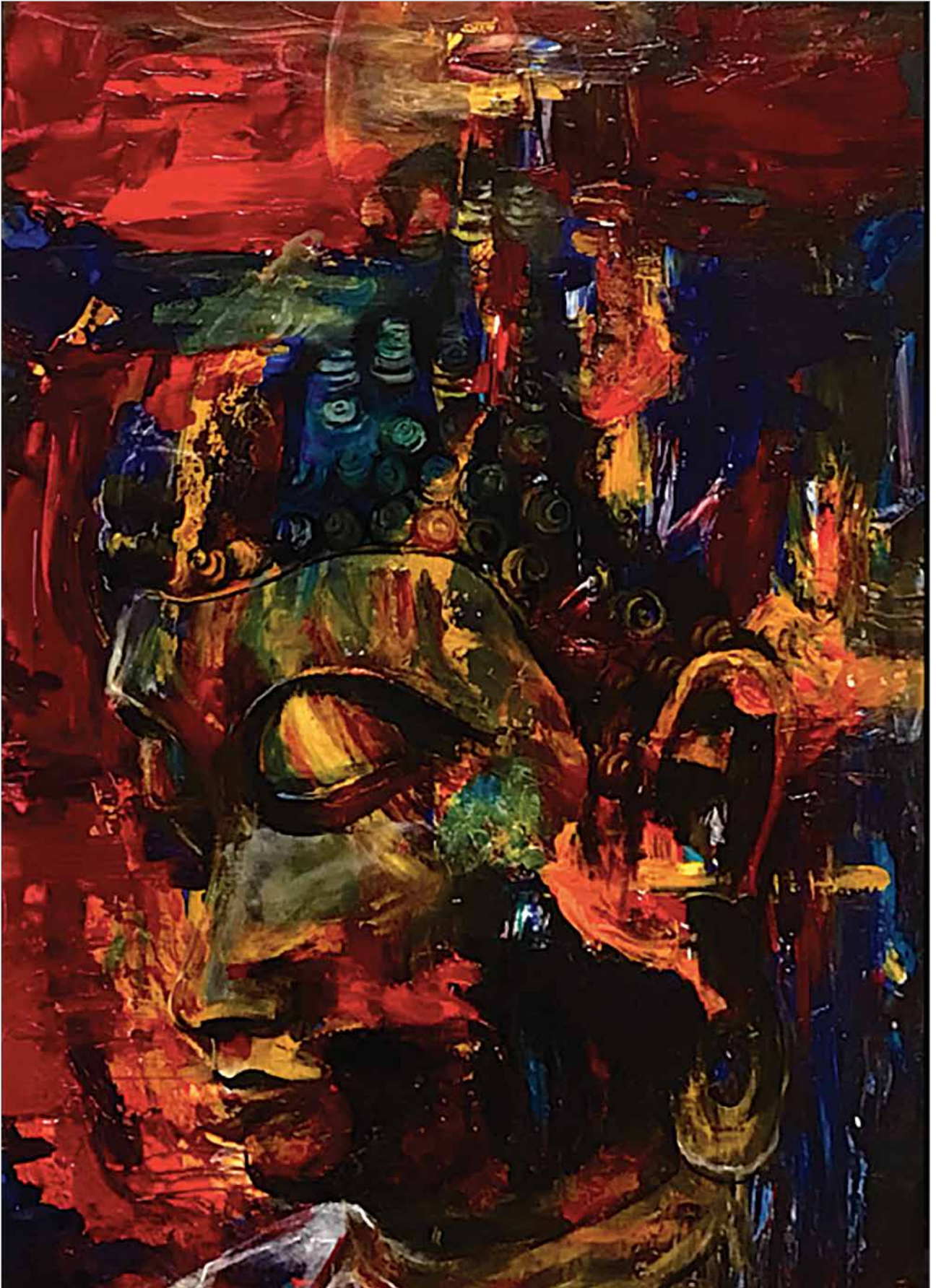
3. Making it easier to find and access services that are right for us:

The right services are available when and where they are needed and are easier to find and access.



6. Experiencing positive and trusting relationships and best practice care:

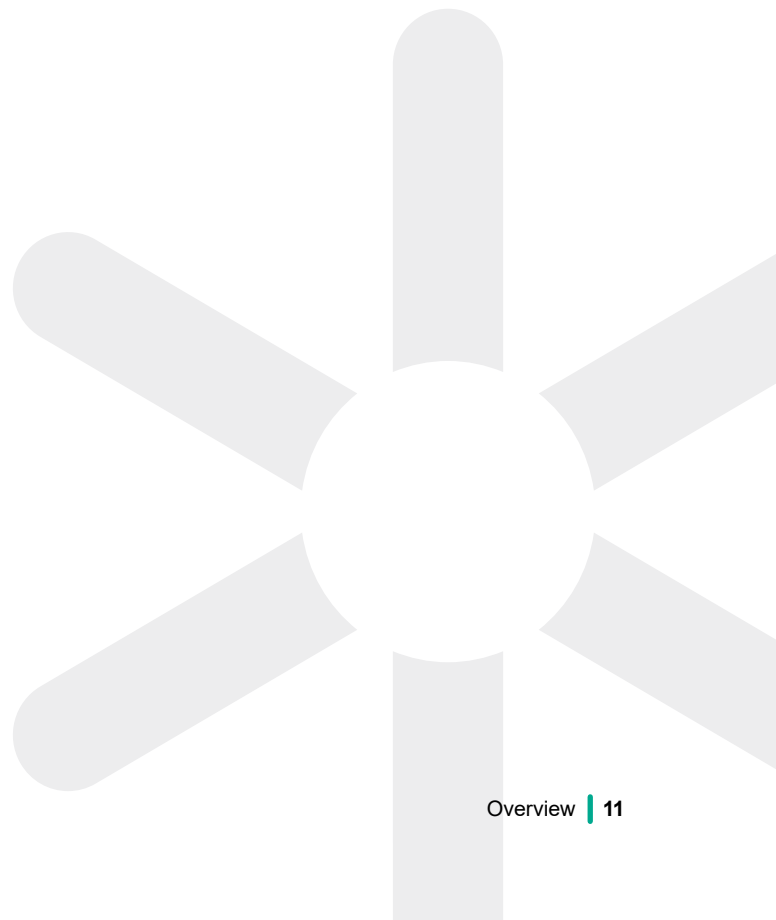
Building the capacity, capability and confidence of everyone who works with young people and their families and carers.



Kathleen Martawan, 22 (she/her)

1.2 Purpose of the YPPA Report on Implementation

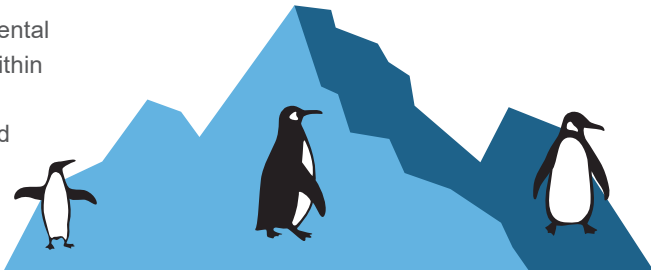
This report provides an overview of the key engagement activities undertaken to inform the development and delivery of the YPPA Report on Implementation and the ongoing governance and reporting arrangements for the implementation of the YPPA. This report also provides an update on the actions outlined in the YPPA, which have commenced implementation.



1.3 Key Statistics

Mental Health and AOD Youth Needs in Western Australia

Individuals may experience 'mild', 'moderate' or 'severe' mental health and/or AOD issues¹. The prevalence and severity within a population helps planners understand the service needs of individuals and communities, and helps provide informed solutions to issues identified through data collection and reporting.



Estimated number of young people (12 to 24 years) that will require professional help/care.



12,996
young people with severe mental health issues



5,031
young people with severe AOD issues

The estimated number of young people who may or may not require any professional help/care.



4,025
young people with moderate mental health issues



587
young people with moderate AOD issues



The cohort of young people who are experiencing life events that puts them at increased risk of developing mild, moderate or severe mental health and/or AOD issues.

- 41.7% of Year 9 to Year 12 students in Western Australia reported 'Mental Health and Wellbeing' as a source of stress in the past year.
- Life experiences including body image concerns, sexuality and gender issues, relationship issues, bullying, abuse and neglect during childhood, and social media use can increase risk of mental health and AOD issues.
- 47.5% of Year 4 to Year 12 students in Western Australia reported they have been bullied and/or cyberbullied by students from their school.
- Barriers such as cost, parental consent and transport limit access to health promotion and healthcare.
- All forms of involvement in bullying were associated with increased risk of psychological distress, emotional and behavioural problems, substance use, self-harm and attempted suicide.
- Young people with existing emotional, behavioural and mental health issues may use AOD to cope with and manage mental health issues.
- 60% of young people with an AOD use disorder also have a co-occurring mental health diagnosis.
- Life experiences often associated with youth suicide includes previously attempted suicide, interpersonal losses, school problems, academic stress, acute conflicts with parental figures and various forms of bullying and abuse.

1. The YPPA uses the definitions outlined in Better Choices, Better Lives: Western Australian Mental Health, Alcohol and Other Drug Services Plan, 2015-2025. Mild populations are treated entirely in the primary care stream and do not need either specialised ambulatory support, specialised psychosocial support or inpatient care. Symptoms are usually resolved within a 12 month period and disruption to performing in normal roles is minimal. Moderate populations require 'enhanced primary care' services, but no inpatient services. Their symptoms persist for longer than 12 months and days out of role is limited to several days only. Severe populations may include the need for ambulatory only and/or inpatient care, and many would benefit from community support services. They experience several negative symptoms that significantly impact on their functioning. As a result of the symptoms experienced, it is estimated that all (100 per cent) of these people will come to the attention of services, and seek or receive mental health treatment.

Estimates were calculated from applying population prevalence estimates used in the Plan to the latest 30 June 2019 Western Australian population estimates for the 12 to 24 age cohort. Population prevalence estimates were based on the national general population and does not take into account specific age groups, location and ethnicity. The MHC acknowledges that these definitions take on a meaning that may not be consistent with other organisations' meanings when they use the terms 'mild', 'moderate' and 'severe'." (excerpt from Plan Update 2018, pg 94).

16,099
young people with moderate mental health issues



2,935
young people with moderate AOD issues



19,704
young people with mild mental health issues



3,354
young people with mild AOD issues

19,704
young people with mild mental health issues



1,677
young people with mild AOD issues

- Vulnerable young people (rural/remote, sexuality, gender diverse, refugee, homeless, and/or Aboriginal) encounter additional barriers such as stigma and discrimination.
- The last five years have seen increases in the numbers of 12 to 24 year old people with mental health related presentations at emergency departments (an increase of 15% between 2015-2016 and 2019-2020).² In the same time period there was a 23% increase in self harm presentations at emergency departments for young people aged 12 to 24, and a 14% increase in alcohol-related emergency department presentations for the same age group.
- Young people experience the highest prevalence and incidence for mental illness across the lifespan. Young people with co-occurring mental health, alcohol and other drug problems are particularly at risk of poor outcomes because their age and stage of physical, neurological, psychological and social development makes them vulnerable.³
- The Productivity Commission report in 2018-2019 estimated the cost of this ongoing disadvantage and poor mental health as \$200-\$220 billion. Conversely, an increased focus on prevention, early intervention and recovery can lead to significant cost savings throughout a person's lifetime.⁴
- Three in four people with a mental illness develop symptoms before the age of 25.⁵
- In 2020 a survey indicated that 91% of young people in Western Australia experienced impact on their mental health and stress levels during the COVID-19 pandemic.⁶ More recent national research indicates 36% of young people continue to report COVID-19 impacting on their stress and anxiety.⁷
- Female young people are significantly more likely than male young people to have anxiety and depression, lower self-esteem, and, some evidence suggests, lower resilience.⁸
- In 2018-19, among Aboriginal Australian adults, an estimated 66% reported low or moderate levels of psychological distress, while 31% reported high or very high levels.⁹

2. Department of Health. (2020). Custom data request. Retrieved 20 October 2020.
 3. MHC, Better Choices, Better Lives: Western Australian Mental Health, Alcohol and Other Drug Services Plan, 2015-2025 (2015).
 4. Productivity Commission, Mental Health, Report No 95 (2020).
 5. Productivity Commission, Mental Health, Report No 95 (2020).
 6. MHC, Young People's Mental Health and Alcohol and Other Drug Use: Priorities for Action 2020-2025 (2020).
 7. Australian Institute of Health and Welfare, Australia's Youth: Covid-19 and the Impact on Young People, June 2021.
 8. Commissioner for Children and Young People, Exploring the Decline in Wellbeing for Australian Girls (August 2021).
 9. Australian Institute of Health and Welfare, Indigenous Health and Wellbeing (July 2020).



everybody is far more complex than one
state of emotion or being



2. Partnering With Young People

The YPPA Report on Implementation has been developed with young people to ensure that their lived experiences and knowledge of the mental health and AOD sector can inform the implementation of the YPPA.

These insights will help drive real change in the mental health and AOD sector and lead to better outcomes for young people across Western Australia.

MHC partnered with the Youth Mental Health Sub Network and the Youth Affairs Council of Western Australia (YACWA) to help ensure that young people had different ways they could choose to be represented, engaged, and involved. This included the establishment of a time-limited Youth Steering Group to guide the development of opportunities for young people and other key stakeholders to provide their advice.

The Youth Steering Group included 10 young people with a diversity of lived experiences including Aboriginal young people, LGBTQIA+ young people, culturally and linguistically diverse (CaLD) young people, young people living with disability, young carers, young parents and young people from regional Western Australia.

This diversity of lived experiences was reflected throughout the various engagement events outlined on the following pages.



To think that I, a young person who has experienced the mental health systems, who has experienced hardships, who had experienced a loss of hope would then put their hand up and just go for it, still blows my mind, in the best possible way. We have such an amazing opportunity for young people like us to have our voices heard and take part in creating an amazing mental health system. Improving mental health treatment for all Australian youth is now something off my bucket list but not out of my mind!

Youth Steering Group member



2.1 What we Heard

A summary of the key engagement events and findings is provided below. A more comprehensive report can be accessed at mhc.wa.gov.au/yppa.



Metropolitan Engagement Event - 30 September to 1 October 2021

Eight Youth Steering Group members and 31 other young people aged between 16 and 24 years came together over two days to share their experiences and advice on how the mental health and AOD sector could best support the needs of young people.

On the second day of the event, Government representatives joined in the conversation and had the opportunity to meet and discuss possible solutions directly with the young people in attendance. The key themes covered during this event have been captured on the following page.

All State Government agencies responsible for implementing the YPPA are united in their commitment to ensuring that the advice and insights provided by young people inform the delivery of their actions in the YPPA.



Seth O'Connell, 17, Armadale Senior High School

What we Heard

Peer workers

- There needs to be recognition of the role young people can perform as peer workers.
- Raise awareness amongst young people with lived experience of mental health and AOD issues that peer work is an option. This could be achieved by promoting peer work within schools and at youth services.
- Lived experience scholarships could be provided to support people who would like to become a peer worker.
- Pathways to become a peer worker which don't rely on formal qualifications should also be established.
- A diverse peer workforce needs to be promoted which encourages people from a diverse range of backgrounds to work within it. This can be supported by consulting directly with leaders from different communities and groups.
- Peer workers should be integrated into all systems of support. This includes crisis services, emergency departments, outreach and transition services and psychosocial supports.
- Peer work structures should actively engage with local communities to ensure that the peer workforce is relevant, appropriate and available to diverse young people.
- Peer work should offer support outside of traditional clinical service models.
- Organisations need to ensure that the wellbeing of peer workers is supported.

Mental health, alcohol and other drugs and family and domestic violence systems

- Young people would like to see integrated services which facilitate the referral process for young people experiencing the unique intersection of mental health and AOD issues and/or family and domestic violence. This service would have several other roles including supporting schools and providing regular and ongoing workforce development training.
- Long-term supports need to be coordinated from a single point.
- Schools are seen as a vital touchpoint in strengthening responses for young people within existing services.
- There needs to be ongoing training for teachers, police, nurses, and other relevant services in trauma-informed practice and family and domestic violence support and identification.
- Family and domestic violence services need to be physically, culturally and environmentally accessible.
- Young people would like to be empowered in making decisions about their care and interventions through a difficult period of their lives.
- Wellbeing practices to increase coping skills and harm reduction strategies should occur at schools.

The Workplace

- Mentally healthy workplaces must recognise young people's unique position within the workplace.
- Young people should be supported to care for their mental health both within and outside the workplace regardless of their employment status.
- Concerns were raised that young casual workers might not disclose their mental health issues for fear of reprisal such as losing shifts.
- Mentally healthy workplaces could be an excellent touchpoint to assist young people in managing their mental health.
- Information should be accessible within the workplace to all employees on the mental health and AOD support services which can be accessed.
- Mental Health First Aid training should be promoted within the workplace.
- Young people proposed developing a comprehensive education, awareness-raising and support framework for youth mental health designed specifically for workplaces.
- It was also raised that young people from diverse backgrounds need to be engaged when developing and updating workplace mental health training. This included LGBTQIA+ young people, Aboriginal and Torres Strait Islander young people, young people with a disability, and young people from CaLD backgrounds.

School & TAFE

- Mental health or AOD issues can lead to young people disengaging from education.
- Schools are critical in ensuring that young people have access to information on mental health and AOD issues and support.
- Young people would also like schools to know what services are available in the wider community to support effective referrals when required.
- It was also acknowledged that not all issues can be supported within schools and there should be an option to provide referrals externally if required.
- Ensure that teachers are trained to support young people experiencing family and domestic violence, mental health and AOD issues.
- Diverse staff from a range of different backgrounds can help young people feel more comfortable in seeking advice. Aboriginal, CaLD, and LGBTQIA+ young people felt like this was particularly important as they didn't then need to 'upskill' people on their unique needs.
- Mental health awareness training should be made available to all students.
- Training and supports for LGBTQIA+ young people need to be increased recognising the higher level of discrimination faced which can contribute to poorer mental health outcomes.
- Different responses are required for primary schools, high schools, university and TAFE.



Regional and Remote Engagement Event – 6 October 2021

Young people living in regional and remote Western Australia met online with Youth Steering Group members to discuss the following key themes.

What we Heard

Peer workers

- Young peer workers in small communities can have their lived experience outed amongst the community which can lead to discrimination.
- Regional and remote young people identified that training to become a peer worker can be metropolitan centric.
- Creating tailored regional training and work opportunities could encourage young people in regional and remote locations to be peer workers. This should be designed in partnership with young people and their communities.
- Awareness campaigns in regional areas should be promoted to encourage more peer workers.
- Young peer workers need support to maintain appropriate boundaries and care for themselves. Developing mentoring systems for young peer workers could help reduce burnout and foster career opportunities.
- Peer worker training needs to be provided in locations with reliable public transport access. This could include offering training at schools or through existing community groups.

Mental health and AOD education

- Young people can experience difficulties accessing services (for example, due to transport options).
- There is a lack of access to high quality information on mental health and AOD issues.
- Many young people don't have trusted and supportive adults to reach out to.
- School staff should undertake mandatory mental health training. This would include principals, teachers, education assistants, and any staff who engage with young people in any form.
- Mental health and AOD education should be made available to all students. This would encourage honest discussions and would also include people with lived experience engaging with students and staff.
- Schools need to have safe spaces to meet young people's needs. This could be a quiet space with sensory toys.

Reducing stigma and discrimination

- Small communities can make it hard for people to seek help.
- Online help-seeking is not always an option in regional areas.
- Regional mentors, which would also be facilitated online, could help ensure that young people have someone to talk to.
- Young people would like to see more people within their community actively championing inclusion and mental health through training.
- Community leaders have a role to play in reducing stigma and discrimination. Examples provided included local Scouts and sporting groups.
- Training needs to be made available to ensure safe conversations and positive mental health within sport and community groups.
- Diversity and inclusivity campaigns should be organised across regional WA.
- Combatting stigma in regional areas first requires accessible services.
- Young people emphasised that local communities need to be engaged with before services are designed and procured.



Young People as Peer Workers



What the State Government is currently doing:

In October 2020 the State Government allocated \$1.2 million in funding to deliver workforce development in the mental health and AOD sector.

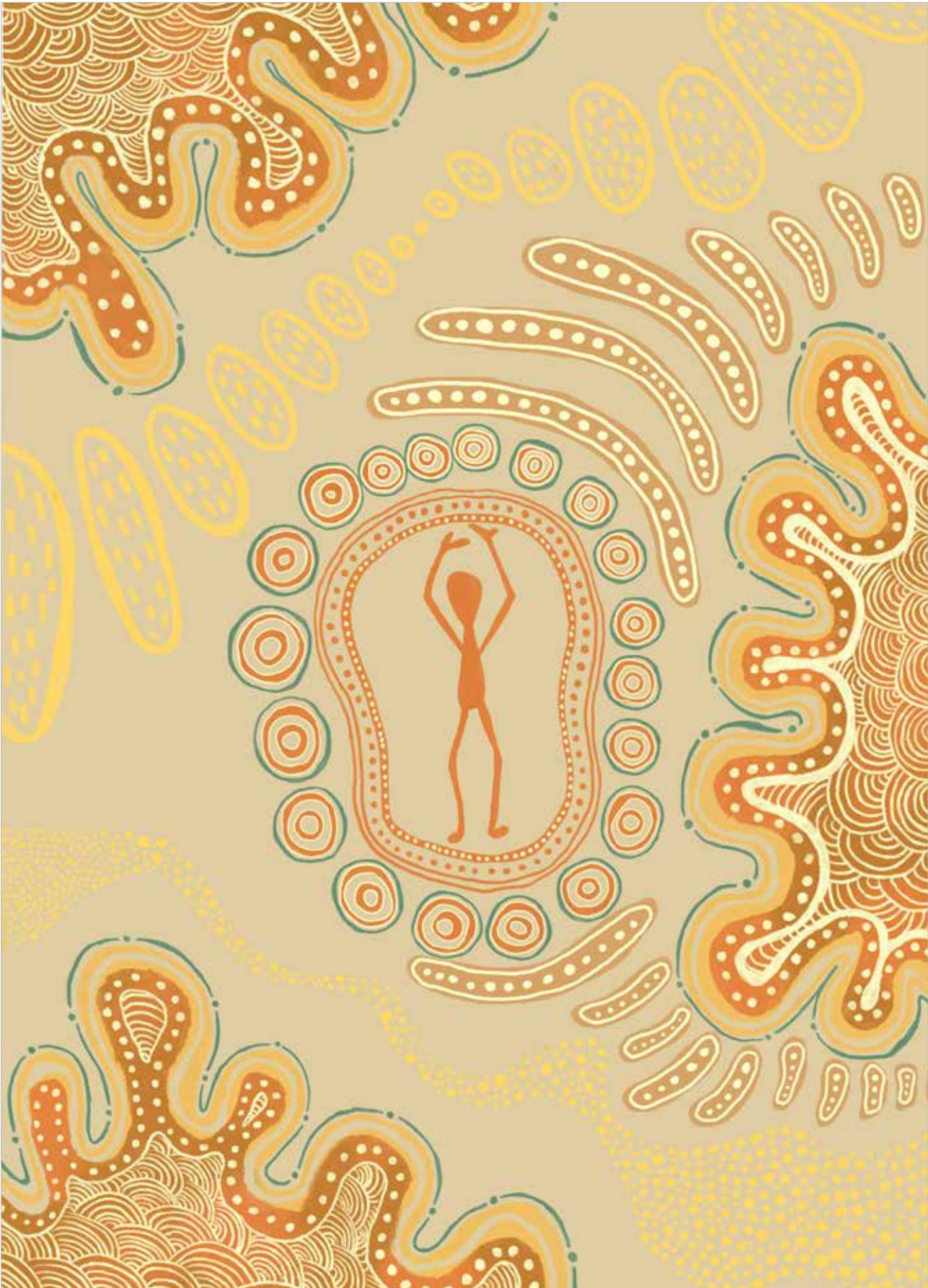
To support this, MHC is developing a Lived Experience (Peer) Workforce Framework which will guide the development of a thriving state-wide Lived Experience (Peer) workforce across the mental health and AOD sector.

The Framework will:

- identify how current peer workforce capacity could be optimised, reconfigured, enhanced, adapted and expanded;
- identify where new peer work services and supports could be developed;
- include strategies to build the capacity of the Peer Workforce;
- be co-designed; and
- be tailored to a WA context, taking into account the perspective and intricacies of both the mental health and AOD sectors.



Jaime Jorquera, 18, Armadale Senior High School



Rickiesha Deegan (she/her), 24 @kieshdesigns



Pilbara engagement – 27 August 2021

This engagement occurred through online surveys and conversations held in the Pilbara to discuss the unique needs of youth services in regional areas. This included engagement at the Youth on Health (YOH Fest) (a health-themed performing and visual arts event for school children) and at the LGBTQIA+ Regional Mental Health workshops.

The conversations covered a diverse range of topics, with participants identifying the need for:

- More local crisis and support services.
- Encouraging more young people to become peer workers.
- Ensuring that support services have diverse staff.
- Workplace mental health supports that are tailored to young employees.
- Opportunities to increase understanding of mental health and AOD issues.
- Ensuring that health, mental health and education services understand the unique challenges faced by some LGBTQIA+ young people.

LGBTQIA+ Young People – 18 to 31 October 2021

An online survey and a focus group in Esperance were held to discuss safe and inclusive services for LGBTQIA+ young people. The stakeholders engaged with included TransFolk of WA, Youth Pride Network, Bi+ Community Perth, WA Aids Council, Freedom Centre and PFLAG Perth (Parents, Families and Friends of Lesbians and Gays).

Some of the proposed solutions to support LGBTQIA+ Young People included:

- Training all health, mental health and education staff in LGBTQIA+ inclusive practices.
- Encouraging local businesses and councils to publicly celebrate LGBTQIA+ awareness days (including Pride Month and Trans Day of Visibility).
- Setting up and resourcing PFLAG to operate in regional communities.
- Supporting LGBTQIA+ projects in local areas through grants.
- Training and supporting peer workers and peer hubs in schools and local communities.
- A media campaign to share stories of local LGBTQIA+ elders and success stories.



CaLD Young People – 4 to 8 November 2021

An online survey was conducted to capture views on supporting safe and inclusive services for CaLD communities. This included attendees and organisers of the 2021 Catalyst Youth Summit which is a group of young people from refugee and migrant backgrounds who want to effect change in their community.

Some of the suggestions put forward to support CaLD young people included:

- Providing CaLD specific specialist services.
- The need to communicate in culturally appropriate ways and ensuring that community leaders and representatives are engaged to advise best practice in mental health and AOD communication.
- Regular CaLD training within mental health services.
- Engaging CaLD young people in decision making processes.

Family and Carers – 18 October to 8 November 2021

An online survey was undertaken to identify the views and experiences of individuals caring for young people with mental health and/or AOD issues. Stakeholders engaged included Carers WA, Consumers of Mental Health WA, the Collaborative and Response Engagement CARE Hub through the Western Australian Association for Mental Health and the Mental Illness Fellowship WA.

Some of the suggestions put forward to support families and carers included:

- Providing support for carers when services are being provided for young people.
- Peer supports for carers to assist in navigating mental health and AOD services.
- Ensuring that families and carers can inform service design.





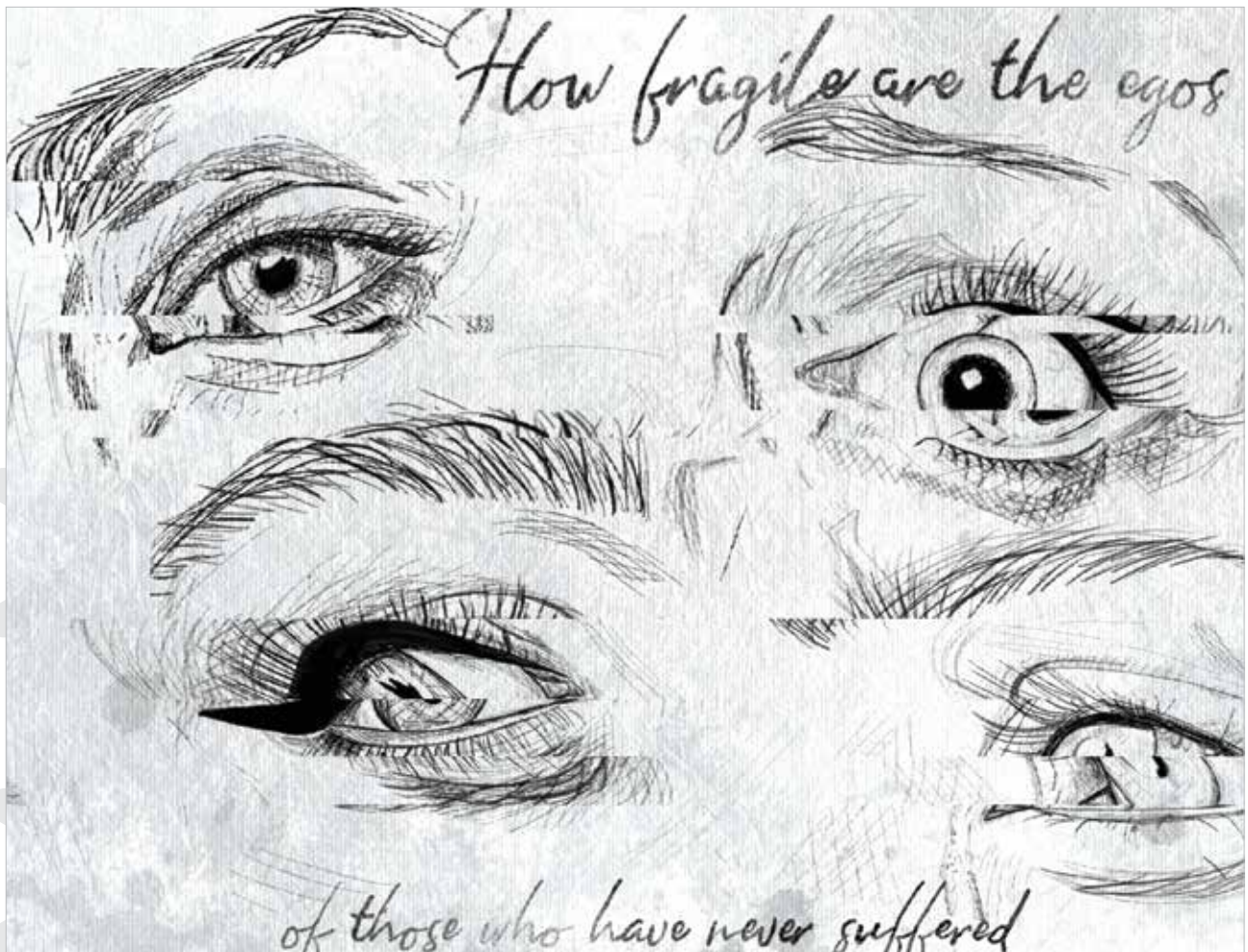


Eating Disorders – 18 October to 8 November 2021

An online survey was undertaken focusing on young people living with an eating disorder. This survey was promoted with the Butterfly Foundation, the Youth Steering Group, metropolitan and regional summit participants, key community advocates, and researchers at Curtin University.

Feedback highlighted that:

- Peer support is critical for people living with an eating disorder, particularly in the absence of formal care.
- Eating disorder supports need to be inclusive of LGBTQIA+ communities and neurodiversity.
- There should be training for medical and mental health professionals that is specific to young people.
- Schools play an important role in educating young people on eating disorders, including how students can support each other.



Amberley Sparkes (she/her), 23

—

3. YPPA Actions Progress Update

The YPPA Immediate Actions, Top Priorities and Future Steps are set out in full in the [Young People's Mental Health and Alcohol and Other Drug Use: Priorities for Action 2020-2025](#), available at mhc.wa.gov.au/yppa

The following pages provide an update on all the actions that have already commenced, including progress made to date, and the lead and partner agencies responsible for implementation. The term 'lead agency' refers to the agency implementing the action; 'partner agencies' are those supporting the implementation of the actions.

YPPA Immediate Actions

Immediate actions are those which are currently being implemented within existing resources.

YPPA Top Priorities

Top Priority actions are those which have been deemed as the first priorities for implementation should additional funding become available. A number of Top Priorities have now been funded through the 2021-22 Budget, which saw a record \$1.114 billion investment in mental health, and AOD services in Western Australia. This is an increase of 11% from the previous year.

A significant investment was made in key initiatives for young people including:

- \$9.5 million over three years for [Psychosocial Support Packages for Young People](#).
- \$18.2 million over four years for the [Youth Long-Term Housing and Support Program](#).
- \$10.6 million over four years to establish a Youth Mental Health and AOD [Step Up Step Down](#) service.
- \$9.8 million for Youth Alcohol and Other Drug Workers in Youth Accommodation and Support Services on an ongoing basis.
- \$9.2 million over the next four years to extend the [Strong Spirit Strong Mind Public Education Campaign](#).
- \$12.6 million has been allocated to establish a new Child, Adolescent and Youth Forensic Outreach Service on an ongoing basis.
- \$10 million has been allocated over four years for the expansion of youth mental health community treatments services - [Youth Axis, YouthLink and YouthReach South](#).
- \$0.4 million to continue the peer-based support and education for LGBTQIA+ youth.
- \$35.3 million over four years for the expansion of the Youth Community Assessment and Treatment Teams.

YPPA Future Steps

Future Steps actions are those which were identified as longer term priorities. Whilst these were earmarked in the YPPA for future implementation, there have been opportunities to commence the implementation of two Future Steps.



Actions

Helping us stay well

Promoting mental wellbeing, and intervening early to prevent mental health issues and alcohol and other drug related harm.



Immediate Actions

1.1 Suicide prevention

ACTION Develop regional Aboriginal suicide prevention plans to identify local actions focusing on youth.

UPDATE In June 2021, regional Aboriginal suicide prevention plans were delivered to the MHC for each of Western Australia's 10 Health Regions and implementation has commenced. The activities within each plan are regionally and community focused and include youth specific actions which aim to support social and emotional wellbeing.

Helping Us Stay Well 1.1 (Immediate action)

| | |
|------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | N/A |
| Status | Completed |
| Completion Date | June 2021 |

1.2 Fetal Alcohol Spectrum Disorder (FASD)

ACTION Increase awareness of the harms associated with alcohol use among women of child bearing age, the broader community and health professionals, through state-wide and targeted evidence-based initiatives.

UPDATES 1.2a A state-wide public education campaign has been launched and will run using mass media until 2022.

Training sessions have commenced for health workers and other community service providers that work with women of child bearing age.

Midwives and child health nurses routinely discuss risks and harms associated with alcohol consumption during pregnancy and breastfeeding and conduct brief interventions and referral as required. Midwives assess alcohol use during pregnancy as part of routine ante-natal care.

1.2b The development of a data information system which identifies high-risk communities and monitors changes in key indicators has begun. The community development component will commence when this data tool is complete.

Additionally, the Department of Health is leading the Birthing on Country Project which will incorporate actions to increase awareness of harm associated with alcohol use in women of child bearing age. The Office of the Chief Medical Officer through the Sustainable Health Review Recommendation's 3a and 25 is coordinating the Aboriginal Health Practitioner Project for Certificate IV or Diploma qualified and registered professionals with skills across a wide range of clinical areas, including but not limited to Maternal and Child Health and Mental Health. This role, once established in the Department of Health through the industrial award, will be ideally placed to work collaboratively with health care teams and Aboriginal communities to decrease the incidence of alcohol consumption in pregnancy.

Helping Us Stay Well 1.2a (Immediate action)

| | |
|------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Health |
| Status | In Progress |
| Completion Date | June 2022 |

Helping Us Stay Well 1.2b (Immediate action)

| | |
|------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Health |
| Status | In Progress |
| Completion Date | June 2022 |

Helping us stay well

1.2c The WA Country Health Service reports that Fetal Alcohol Spectrum Disorder has been identified as an area of priority in the Carnarvon AOD Action Plan. The Community Alcohol and Drug Service provides community education and awareness at events such as Divaz Day and through yarning workshops with men on how they can support their partners to avoid alcohol during pregnancy.

The Kimberley Community Alcohol and Drug Service operates an annual Beautiful Bumps program promoting alcohol abstinence during pregnancy, as well as other community education Fetal Alcohol Spectrum Disorder week activities.

1.3 AOD-related Violence¹⁰

ACTION Adapt and pilot the renowned Cardiff Model to prevent AOD-related violence and reduce burdens on emergency departments and other frontline services.

UPDATE The MHC has commenced exploration of a potential pilot site, and is gathering information to inform the Western Australian model.

1.4 AOD-related harm reduction

ACTION Develop event guidelines reducing the risk of AOD related harm at music festivals and high-risk events.

UPDATE A safer events interagency and key stakeholder group has been formed, with meetings occurring in 2021 to inform the development of these guidelines.

1.5 AOD-related harm reduction

ACTION Work with communities across the State to implement Alcohol and Other Drug Management Plans/Community Wellbeing Plans to reduce AOD related harm and to improve mental wellbeing.

UPDATE Approximately 30 community plans are currently in place across Western Australia. The development of these plans is led by the community and supported by Community Alcohol and other Drug Prevention staff across the State. Most of these plans have strategies to address mental health and AOD use among young people. MHC supports regional prevention staff to facilitate the implementation of activities outlined in these plans.

Helping Us Stay Well 1.2c (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Health

Status In Progress

Completion Date June 2022

Helping Us Stay Well 1.3 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Health Service Providers

Status In Progress

Completion Date 2024

Helping Us Stay Well 1.4 (Immediate action)

Lead Agency Department of Health

Partner Agencies Mental Health Commission
WA Police

Status In Progress

Completion Date June 2023

Helping Us Stay Well 1.5 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies N/A

Status In Progress

Completion Date Ongoing

¹⁰ Florence, C., Shepherd, J., Brennan, I., and Simon, T. An economic evaluation of anonymised information sharing in a partnership between health services, police and local government for preventing violence-related injury. *Injury Prevention*. 2014; 20(2):108-114. doi:10.1136/injuryprev-2012-040622.

1.6 Evidence-based prevention activities in schools

ACTION Promote the following existing evidence-based prevention activities within schools:

- Response to Suicide and Self Harm in Schools Program
- School Drug Education Road Aware
- Aussie Optimism
- Teen Mental Health First Aid or other evidence based mental health literacy programs.

UPDATES 1.6a The Department of Education coordinates the Schools Response to Suicide and Self-Harm Program, which includes the coordination and delivery of Gatekeeper Suicide Prevention Training and Teen Mental Health First Aid across Government and non-Government schools.

The Child and Adolescent Mental Health Service collaborates with the Department of Education on the Response to Suicide and Self Harm in Schools Program.

The Department of Education delivers the Teen Mental Health first Aid course which provides Years 10 to 12 students with skills to identify and support peers with mental health issues and link them in with appropriate adults.

The Department of Education staff access the Gatekeeper Suicide Prevention Training which has been developed for professionals and paraprofessionals working with at risk youth.

1.6b MHC has a Memorandum of Understanding with the Department of Education to provide best practice AOD primary prevention education through the School Drug Education Road Aware program. The program is delivered across Western Australia through three school sectors (public schools, Catholic Education WA and Association of Independent Schools of WA).

The Department of Education also supports whole-school approaches, including a range of evidence-based social and emotional learning programs and resources, such as Promoting Alternative Thinking Strategies, Aussie Optimism and Friendly Schools Plus:

- Promoting Alternative Thinking Strategies – a comprehensive year-by-year curriculum that can be implemented from Kindergarten to Year 6 for enhancing social and emotional competencies and understanding in children, including self-control, emotional awareness and interpersonal problem-solving skills.
- Aussie Optimism – a suite of programs that provides skills and competencies to build resilience and enhance mental health in children from Years 1 to 8. Each program consists of 10 modules that feature developmentally appropriate activities to develop students' coping skills across a variety of contexts.
- Friendly Schools Plus – learning activities about how to reduce and prevent bullying, including cyberbullying, with a strong emphasis

Helping Us Stay Well 1.6a (Immediate action)

| | |
|-------------------------|--|
| Lead Agency | Department of Education |
| Partner Agencies | Health Service Providers Mental Health Commission |
| Status | In Progress |
| Completion Date | Ongoing |

Helping Us Stay Well 1.6b (Immediate action)

| | |
|-------------------------|--|
| Lead Agency | Department of Education |
| Partner Agencies | Health Service Providers Mental Health Commission |
| Status | In Progress |
| Completion Date | Ongoing |

Helping us stay well

on resilience, positive communication, self-management and social responsibility. It includes individual, group, family and school community level actions to address and prevent bullying in its social context.

1.6c The Department of Health's Growing and Developing Healthy Relationships website offers evidence informed curriculum support to schools and educators delivering Relationships and Sexuality Education to young people. This includes lessons and information on sexual consent, safer sex, sexting and the associated links to mental health and AOD.

Additionally, Health Service Providers employ community health nurses who work with schools on prevention strategies.

1.6d The Deadly Thinking and the Aboriginal Mental Health First Aid programs are delivered across regions through engaging with local schools and ongoing local collaborations across local service providers and Aboriginal communities.

1.6e The DETECT-Schools Study was a research project carried out in partnership between the Telethon Kids Institute, Department of Education and the Department of Health to study and examine prevalence of COVID-19 in Western Australian schools.¹¹

This project included the following components:

- COVID-19 surveillance at a selection of representative of schools across the State (Module 1).
- Proposed enhanced public health follow up of any index case within a school (Module 2).
- A survey-based psychosocial assessment of students, staff and parents (Module 3).

The revised scope for the study included 80 public schools (40 test and 40 control schools), which provided more breadth and coverage of school types than the initial 30 schools. In total 79 schools were included.

Helping Us Stay Well 1.6c (Immediate action)

Lead Agency Department of Education

Partner Agencies Health Service Providers
Mental Health Commission

Status Completed

Completion Date 2020

Helping Us Stay Well 1.6d (Immediate action)

Lead Agency Health Service Providers

Partner Agencies N/A

Status In Progress

Completion Date Ongoing

Helping Us Stay Well 1.6e (Immediate action)

Lead Agency Department of Health

Partner Agencies Department of Education

Status Completed

Completion Date 2021

¹¹ Telethon Kids Institute, Department of Health, Department of Education, *DETECT-Schools Study: Understanding the Impact of Covid-19 in Western Australian Schools, ND*, accessed 6 December 2021.

1.7 Guidance on best-practice approaches to mental health in sport settings

ACTION Establish an industry led, collaborative project to develop a framework to guide prevention and promotion activity in community sport settings.

UPDATE The Mental Health and Wellbeing Community Sport Framework to guide prevention and promotion activity in community sport settings is finalised and was released during Mental Health Week, October 2021. The development of the Framework was led by SportWest (Western Australia's peak body for sport) and WAAMH, with funding from Healthway.

MHC, the Department of Local Government, Sport and Cultural Industries and the Western Australian Local Government Association were represented on the project steering committee. Key stakeholders were consulted to inform the Framework.

1.8 Prevention and promotion within Culturally and Linguistically Diverse Communities

ACTION Identify new distribution channels in the CaLD community for prevention and promotion materials.

UPDATE The MHC has commenced an audit of its public education resources to identify the most effective communication methods and channels to distribute prevention and promotion information to the CaLD community. The audit will also identify which languages these materials should be translated to based on identified need and in consultation with the Office of Multicultural Interests.

1.9 Better use of data

ACTION Relevant agencies working in collaboration to ensure that young people with multiple risk factors for suicide, along with their family and carer networks are provided with timely and appropriate evidence-based supports.

UPDATE Data sharing protocols are being reviewed and improved between non-Government organisation service providers and Health Service Providers such as Active Recovery Teams and the Youth Mental Health and AOD Homelessness Service Service.

A new Data Sharing Memorandum of Understanding between the Department of Health and the MHC has been established to improve data sharing between the two agencies.

The MHC and the Departments of Communities, Health and Treasury participated in the development of the Department of the Premier and Cabinet Data Hub which included entering into a multi-agency data sharing agreement. Linked data to support the YPPA was provided to MHC via Department of Treasury-led Social Investment Data Resource Project.

Helping Us Stay Well 1.7 (Immediate action)

| | |
|-------------------------|--|
| Lead Agency | Healthway SportWest Western Australian Association for Mental Health |
| Partner Agencies | Department of Local Government, Sport and Cultural Industries Mental Health Commission |
| Status | Completed |
| Completion Date | October 2021 |

Helping Us Stay Well 1.8 (Immediate action)

| | |
|-------------------------|--|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Local Government, Sport and Cultural Industries |
| Status | In Progress |
| Completion Date | Ongoing |

Helping Us Stay Well 1.9 (Immediate action)

| | |
|-------------------------|--|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Communities Department of Education Department of Health Health Service Providers |
| Status | In Progress |
| Completion Date | Ongoing |

1.10 Regulations for: home delivery of alcohol; and nitrous oxide

ACTION a) **Regulations for nitrous oxide** - Develop effective regulations for nitrous oxide given young people disproportionately utilise these services.

b) **Regulations for home delivery of alcohol** - Develop effective regulations for home delivery of alcohol.

UPDATES 1.10a The Nitrous Oxide Expert Working Group (chaired by MHC) has been formed to provide advice about appropriate responses to reduce harms associated with the sale, supply and consumption of nitrous oxide for the purpose of intoxication. This working group has identified a range of options and is currently investigating the optimal regulatory response.

1.10b The Department of Local Government, Sport and Cultural Industries has developed regulations governing the delivery of alcohol which will require anyone accepting alcohol to show identification to verify their age and will prohibit same day unattended deliveries. The regulations will come into effect on 1 February 2022 and will be reviewed after 18 months with feedback from the relevant stakeholders.

Helping Us Stay Well 1.10a (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Health
WA Police

Status In Progress

Completion Date October 2022

Helping Us Stay Well 1.10b (Immediate action)

Lead Agency Department of Local Government,
Sport and Cultural Industries

Partner Agencies N/A

Status Complete

Completion Date February 2022

Top Priorities

1.11 Expanded state-wide campaigns and related community action

ACTION Expanded state-wide campaigns and related community action in order to:

- Reduce alcohol-related harm.
- Minimise the risk of harms relating to drug use.
- Raise awareness of social and emotional wellbeing and the harms associated with AOD use among young Aboriginal people, their families and communities, such as through the Strong Spirit Strong Mind Metropolitan Project.

UPDATE A new Strong Spirit Strong Mind Youth project is in development with an expanded state-wide public education campaign expected to be launched in 2022. The 2021-22 Budget included \$9.2 million over four years for this project.

A new Drug Aware campaign targeting young people is in development and will be launched in mid-2022.

Helping Us Stay Well 1.11 (Top priority action)

Lead Agency Mental Health Commission

Partner Agencies N/A

Status In Progress

1.13 Mental health and wellbeing for school-aged young people

ACTION Leveraging off existing activities where appropriate, develop evidence-based mental health education programs to promote mental health and prevent mental health related issues. This could include social emotional learning programs and the Be You directory.

UPDATE MHC continues to fund prevention activities for school-aged young people through evidence-based programs such as the Aussie Optimism Program which aims to prevent anxiety and depression in children and adolescents.

Helping Us Stay Well 1.13 (Top priority action)

Lead Agency Department of Education

Partner Agencies Mental Health Commission

Status In Progress

1.14 Mental health and wellbeing for school-aged young people

ACTION Implement initiatives designed to strengthen approaches to mental health and wellbeing from the cross sector mental health and wellbeing strategy, being finalised by the Department of Education, Catholic Education WA and Association of Independent Schools WA.

UPDATE Funding for the planning phase has been secured and planning has begun.

Helping Us Stay Well 1.14 (Top priority action)

Lead Agency Department of Education

Partner Agencies N/A

Status In Progress

1.15 Mental health and wellbeing promotion monograph (now known as the Western Australian Mental Wellbeing Framework)

ACTION Develop a monograph to identify evidence-based and informed strategies for best practice in addressing mental health issues for young people.

UPDATE MHC is developing the Western Australian Mental Wellbeing Framework to define the guiding principles, foundations and best practice initiatives for the promotion of wellbeing and prevention of mental health conditions in Western Australia. Once finalised, the Framework will also provide a guide for other Government departments, peak bodies, non-Government organisations that are progressing work in relation to mental health and wellbeing.

MHC engaged Tuna Blue to undertake targeted state-wide consultation to inform the development of the Framework. An online survey was also promoted to inform the development of the Framework.

The Wellbeing Framework is planned to be publicly released in early 2022.

1.18 Prevention and promotion within CaLD communities

ACTION Expand and tailor public education campaigns to address the stigma associated with accessing mental health and AOD services.

UPDATE MHC included imagery representative of the Western Australian population, including people from CaLD backgrounds, in its most recent Think Mental Health Families Under Pressure campaign. MHC will continue to adopt this approach to its population based public education as new campaigns are developed.

1.20 Expand mentoring programs

ACTION Provide support to develop skills, which will help young people increase their resilience.

UPDATE The State Government's Youth portfolio supports a diverse range of development services and engagement opportunities to support young people to attain life skills, develop the knowledge and confidence needed to be involved in community life and to respond to issues impacting their lives. This includes a wide variety of initiatives including Cadets, Kids Helpline, Counselling Support, Youth Parliament, Youth Week and grants programs.

The State Government receives information directly from young people through the Ministerial Youth Advisory Council comprised of young people aged 12 to 25 years, and also supports the Youth Affairs Council of Western Australia.

The State Government continues to implement the Beyond 2020 – Western Australia Youth Action Plan 2020-22.¹³

Helping Us Stay Well 1.15 (Top priority action)

| | |
|-------------|--------------------------|
| Lead Agency | Mental Health Commission |
|-------------|--------------------------|

| | |
|------------------|-----|
| Partner Agencies | N/A |
|------------------|-----|

| | |
|--------|-------------|
| Status | In Progress |
|--------|-------------|

Helping Us Stay Well 1.18 (Top priority action)

| | |
|-------------|--------------------------|
| Lead Agency | Mental Health Commission |
|-------------|--------------------------|

| | |
|------------------|---|
| Partner Agencies | Department of Local Government, Sport and Cultural Industries |
|------------------|---|

| | |
|--------|-------------|
| Status | In Progress |
|--------|-------------|

Helping Us Stay Well 1.20 (Top priority action)

| | |
|-------------|---------------------------|
| Lead Agency | Department of Communities |
|-------------|---------------------------|

| | |
|------------------|-----|
| Partner Agencies | N/A |
|------------------|-----|

| | |
|--------|-------------|
| Status | In Progress |
|--------|-------------|

¹³ Government of Western Australia, Beyond 2020 – WA Youth Action Plan 2020-22 (2021).

1.21 Aboriginal wellbeing

ACTION Continue to implement the Commitment to Aboriginal Youth Wellbeing. Develop the Empowered Young Leaders Network.

UPDATE The Empowered Youth Network project supports the pre-existing Empowered Young Leaders to sustain a network of young Aboriginal leaders across the Kimberley who can contribute to decisions that affect them and become leaders of change on behalf of their own and future generations. The Department of Communities collaborated with young Aboriginal leaders to develop community, service, and individual outcomes. Empowered Young Leader representatives were engaged as subject matter experts for the Evaluation Panel, providing advice to voting panel members during the consensus meeting. Kimberley Aboriginal Medical Services Limited have been supporting this project from 1 July 2021. The Department of Communities and Kimberley Aboriginal Medical Services Limited continue to work closely on the establishment of the Network.

1.22 Support at-risk young people in the Kimberley, through implementing the Kimberley Juvenile Justice Strategy

ACTION Continue to work in partnership with local governments and Aboriginal Community Controlled Organisations to expand place based on country activities and night patrol programs to engage with young people constructively after hours, weekend and school holidays thereby reducing the risk of them engaging in antisocial behaviour.

UPDATE The Department of Justice continues to partner with Aboriginal Community Controlled Organisations and local governments to support young people in the region.

An additional \$7.8 million to bolster the Kimberley Juvenile Justice Strategy was announced as part of the 2021-22 Budget. This will include funding for community-led initiatives including, but not limited to, supporting night patrol programs and safe place activities.

The 2021-22 Budget also included one-off \$204,000 funding to MHC for work leading the co-design component of the Kimberley Juvenile Justice Strategy initiatives relating to a temporary safe place and an on country facility.

Helping Us Stay Well 1.21 (Top priority action)

Lead Agency Department of Communities

Partner Agencies N/A

Status In Progress

Helping Us Stay Well 1.22 (Top priority action)

Lead Agency Department of Justice

Partner Agencies Department of Communities
Department of Education
Department of Health
Department of Local Government, Sport and Cultural Industries
Department of the Premier and Cabinet
Department of Training and Workforce Development
Department of Treasury
Kimberley Development Commission
Mental Health Commission
WA Police

Status In Progress

1.23 Support at-risk young people in the Kimberley, through implementing the Kimberley Juvenile Justice Strategy

ACTION Expand on alternative education and vocational programs to re-engage young people who have contact with the justice system and are disengaged with mainstream education services to provide pathways to further education and/or employment.

UPDATE This action is linked to action 1.22.

The Kimberley Juvenile Justice Strategy supports the TAFE learning program in Broome and Kununurra. Young people can participate in tailored vocational industry skills programs such as welding, construction, carpentry and agriculture.

1.24 Support at-risk young people in the Kimberley, through implementing the Kimberley Juvenile Justice Strategy

ACTION Provide targeted culture based intensive programs that address mental health, AOD and behavioural issues.

UPDATE This action is linked to action 1.22.

The Kimberley Juvenile Justice Strategy funds a range of culturally safe programs and services delivered by Aboriginal Community Controlled Organisations and local governments that:

- Support improved mental health; and
- Either address AOD and behavioural needs directly; or
- Connect young people with AOD and behavioural supports as needed.

Helping Us Stay Well 1.23 (Top priority action)

Lead Agency Department of Justice

Partner Agencies Department of Education
Department of Training and Workforce Development

Status In Progress

Helping Us Stay Well 1.24 (Top priority action)

Lead Agency Department of Justice

Partner Agencies Department of Communities
Department of Education
Department of Health
Department of Local Government, Sport and Cultural Industries
Department of the Premier and Cabinet
Department of Training and Workforce Development
Department of Treasury
Kimberley Development Commission
Mental Health Commission
WA Police

Status In Progress



Steele McConnell, 25, (he/him) @selfh888

Actions

Supported by our family and community

Boosting whole of community and whole of family engagement, and support for families, loved ones and carers so they can go on supporting young people.

yacwa
.ORG.AU



SAFE SPACES

ALL ABILITY
ALL AGES
ALL BELIEF
ALL CULTURE
ALL GENDER
ALL IDENTITIES
ALL RELATIONSHIPS
ALL SEXUAL

We are kind to others & ourselves
We are curious about things and the ideas that we
listen to them, rather than the in
details of our personal experiences
We listen with an open mind and open heart
We allow ALL people to share
opinions.



Immediate Actions

2.1 Parenting Campaign

ACTION Deliver the Think Mental Health Parenting Campaign to provide parents with practical tips and advice to navigate and promote positive and cooperative behaviour within their families, supporting their child's mental health and wellbeing, including targeted elements for parents from CaLD communities.

UPDATES 2.1a The Think Mental Health 'Families Under Pressure' campaign was launched on 16 December 2020. This campaign highlights the importance of being able to express emotion and the role of parents and caregivers. The first phase of this campaign ran from mid-December to late February and a second burst from April 2021 to June 2021. The campaign has been rolled out across TV, online, social media, outdoor media and cinema.

2.1b Discussions between the Department of Local Government, Sport and Cultural Industries and MHC are ongoing, with the intention of translating targeted campaign elements for parents from CaLD communities.

2.2 Recovery College

ACTION Promote the opportunity to develop Recovery College courses that will support families and carers in responding to the needs of their children and young people.

UPDATES In collaboration with HelpingMinds, Health Service Providers support the implementation of local Recovery Colleges by promoting the Colleges to those with a lived experience and staff.

The Recovery Colleges are promoted by the WA Recovery College Alliance (WARCA) and associated partners, including Recovery College WA; Alcohol and Other Drug Consumer and Community Coalition; Bay of Isles Community Outreach; Consumers of Mental Health WA; Community Options Australia; ConnectGroups; Curtin University; Hope; MIND Australia; Palmerston; Pathways South West; Richmond Wellbeing; Rise; the Salvation Army and Women's Health and Family Services.

The Recovery Colleges are promoted through websites and social media. Local Action Committees, which will represent local issues and to promote the use of Recovery Colleges locally, are being developed. Additionally the Principal regularly liaises with other non-Government organisations, Health Service Providers and various TAFEs, inclusive of promoting courses and securing course venues. Courses are currently available across the metropolitan area, and in Northam and Bunbury.

Supported by our family and community 2.1a (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies N/A

Status Completed

Completion Date July 2021

Supported by our family and community 2.1b (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Local Government, Sport and Cultural Industries

Status In Progress

Completion Date March 2023

Supported by our family and community 2.2 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Health Service Providers

Status In Progress

Completion Date June 2024

2.3 Information for Local Governments

ACTION To complement existing alcohol management resources, develop information resources on mental health, illicit drugs, misuse of pharmaceuticals and other drugs of concern for Local Governments identifying issues in their community.

UPDATES 2.3a Local governments and the WA Local Government Association are co-designing a project based on previous success with this approach on alcohol resources.

Phase 1 drafting of the illicit drugs and misuse of pharmaceuticals support resource has commenced. Consultation is in progress.

Phase 2 preliminary stakeholder engagement for the development of the mental health resource has commenced.

2.3b WA Country Health Service reports that in the Midwest and Kimberley Alcohol and Other Drug management groups, and Community Alcohol and Drug Services are distributing and updating local government and other agencies on evidence-based information and resources for young people.

When a local issue arises, the Community Alcohol and Drug Services are leading agency in responding to the request for information and also provide training to local government as needed. Community Alcohol and Drug Services teams also support the development and enact Volatile Substance Use plans in partnership with stakeholder agencies in each region.

2.4 Convene a key expert/stakeholder Think Tank

ACTION Utilise the Think Tank to inform alcohol-related policies and community support to reduce children and young people's exposure to alcohol use and prevent associated harm.

UPDATE Preliminary planning for the event has begun. A literature review was commissioned to inform planning and was delivered in October 2021.

Supported by our family and community 2.3a (Immediate action)

| | |
|-------------------------|---|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Local Government, Sport and Cultural Industries Health Service Providers |
| Status | In Progress |
| Completion Date | Phase 1 June 2022 Phase 2 June 2022 |

Supported by our family and community 2.3b (Immediate action)

| | |
|-------------------------|---|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Local Government, Sport and Cultural Industries Health Service Providers |
| Status | In Progress |
| Completion Date | Ongoing |

Supported by our family and community 2.4 (Immediate action)

| | |
|-------------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | N/A |
| Status | In Progress |
| Completion Date | May 2022 |

Top Priorities

2.5 Integrated family and domestic violence and mental health and AOD services

ACTION Strengthen family and domestic violence services through integrating, co-locating or embedding mental health and AOD workers.

UPDATE The MHC and the Department of Communities continue to work together to maximise opportunities to coordinate supports within the community.

The collaboration between MHC and the Department of Communities aims to respond to key strategies and initiatives including, but not limited to:

- Path to Safety - First Action Plan 2020-2022 (Path to Safety Action Plan);
- A Safe Place: A Western Australian Strategy to provide Safe and Stable Accommodation, and Support to People experiencing Mental Health, AOD Issues 2020-2025;
- The National Plan to Reduce Violence against Women and their Children 2010-2022;
- All Paths Lead to a Home: Western Australia's 10-Year Strategy on Homelessness 2020-2030;
- Western Australian State Priorities, Mental Health, Alcohol and Other Drugs 2020-2024; and
- National Mental Health and Wellbeing Pandemic Response Plan.
- Development of an Aboriginal Family Safety Strategy for Western Australia

2.8 Support for parents and schools

ACTION Increase support to all schools, to deliver mental health programs.

UPDATE MHC continues to fund prevention activities for school-aged young people through evidence-based programs such as the Aussie Optimism Program which aims to prevent anxiety and depression in children and adolescents.

Planning is being undertaken on ways to increase support to schools to deliver mental health programs.

Supported by our family and community 2.5 (Top priority action)

Lead Agency Department of Communities

Partner Agencies Department of Health
Mental Health Commission

Status In Progress

Supported by our family and community 2.8 (Top priority action)

Lead Agency Department of Education

Partner Agencies Mental Health Commission

Status In Progress

2.9 Support for parents and schools

ACTION Make it the norm for parents not to provide alcohol to their teenager.

UPDATE The 'I need you to say no' campaign is the third phase of MHC's state-wide education and persuasion prevention strategy to reduce alcohol-related harm among young people in Western Australia. One of the key objectives of the campaign is to increase the age at which adults believe it is acceptable for adolescents to initiate alcohol use.

The 2021-22 Budget also included \$6.7 million for the expansion of the Alcohol.Think Again – Parents, Young People and Alcohol Campaign.

2.10 Support for parents and schools

ACTION Develop strategies to ensure parents, families and teachers are supported in preventing and responding to the mental health and AOD needs of their children, and receive support themselves as needed.

UPDATE MHC provides ongoing funding for school based AOD and mental health programs that support teachers and the broader school community to prevent and respond to AOD and mental health needs of children and adolescents. These programs include the Aussie Optimism Program and the School Drug Education Road Aware program.

2.11 Support for parents and schools

ACTION Increase access and promotion to free parenting programs (such as Triple P, Partners in Parenting), including greater investment in online formats.

UPDATE The Triple P program is provided across the State, with online programs tailored for parenting in times of COVID-19 and face-to-face sessions continuing in the metropolitan area and south west.

2.13 Information for CaLD communities

ACTION Address gaps in information and create awareness of mental health and AOD services to families from CaLD backgrounds and cultural and religious leaders.

UPDATE The Department of Local Government, Sport and Cultural Industries will promote awareness of mental health and AOD services to families from CaLD backgrounds, including cultural and religious leaders.

Supported by our family and community 2.9 (Top priority action)

| | |
|------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | N/A |
| Status | In Progress |

Supported by our family and community 2.10 (Top priority action)

| | |
|------------------|--------------------------|
| Lead Agency | Department of Education |
| Partner Agencies | Mental Health Commission |
| Status | In Progress |

Supported by our family and community 2.11 (Top priority action)

| | |
|------------------|-------------------------|
| Lead Agency | Department of Education |
| Partner Agencies | N/A |
| Status | In Progress |

Supported by our family and community 2.13 (Top priority action)

| | |
|------------------|---|
| Lead Agency | Department of Local Government, Sport and Cultural Industries |
| Partner Agencies | Mental Health Commission |
| Status | In Progress |

2.14 Support for young people in vocational education settings

ACTION Explore ways in which the vocational education and training system can better support young people's mental health and wellbeing, including by improving mental health literacy of parents of young people (where the parents are students at TAFE themselves).

UPDATE The Department of Training and Workforce Development held a workshop in early 2021 to explore strategies to better support young people. This workshop involved metropolitan and regional TAFE colleges, Department of Training and Workforce Development and MHC staff.

The Department of Training and Workforce Development also participated in the YPPA Metropolitan Perth Engagement Event to hear from a diverse range of young people on how to best address their needs and most effectively implement the YPPA.

2.15 Support for young people in vocational education settings

ACTION Ensure that students transitioning to TAFE from Education are supported and provided with access to the services they need.

UPDATE TAFE Colleges, the Department of Training and Workforce Development and the Department of Education, through an interagency working group, are actively exploring strategies which will support young people transitioning between sectors.

2.16 Families and carers have a formal role in providing care and support

ACTION Develop service guidelines, processes and models of service/care in the mental health and AOD sector, that recognise the role of families in the care of their children.

UPDATE The Child and Adolescent Mental Health Service is developing a system-wide model of service delivery for Family Peer Support Workers. The model will be piloted across each of the Child and Adolescent Mental Health Service directorates, with recruitment expected to commence in early 2022.

Supported by our family and community 2.14 (Top priority action)

| | |
|-------------------------|--|
| Lead Agency | Department of Training and Workforce Development |
| Partner Agencies | N/A |
| Status | In Progress |

Supported by our family and community 2.15 (Top priority action)

| | |
|-------------------------|--|
| Lead Agency | Department of Training and Workforce Development |
| Partner Agencies | Department of Education |
| Status | In Progress |

Supported by our family and community 2.16 (Top priority action)

| | |
|-------------------------|---------------------------|
| Lead Agency | Department of Health |
| Partner Agencies | Department of Communities |
| Status | In Progress |



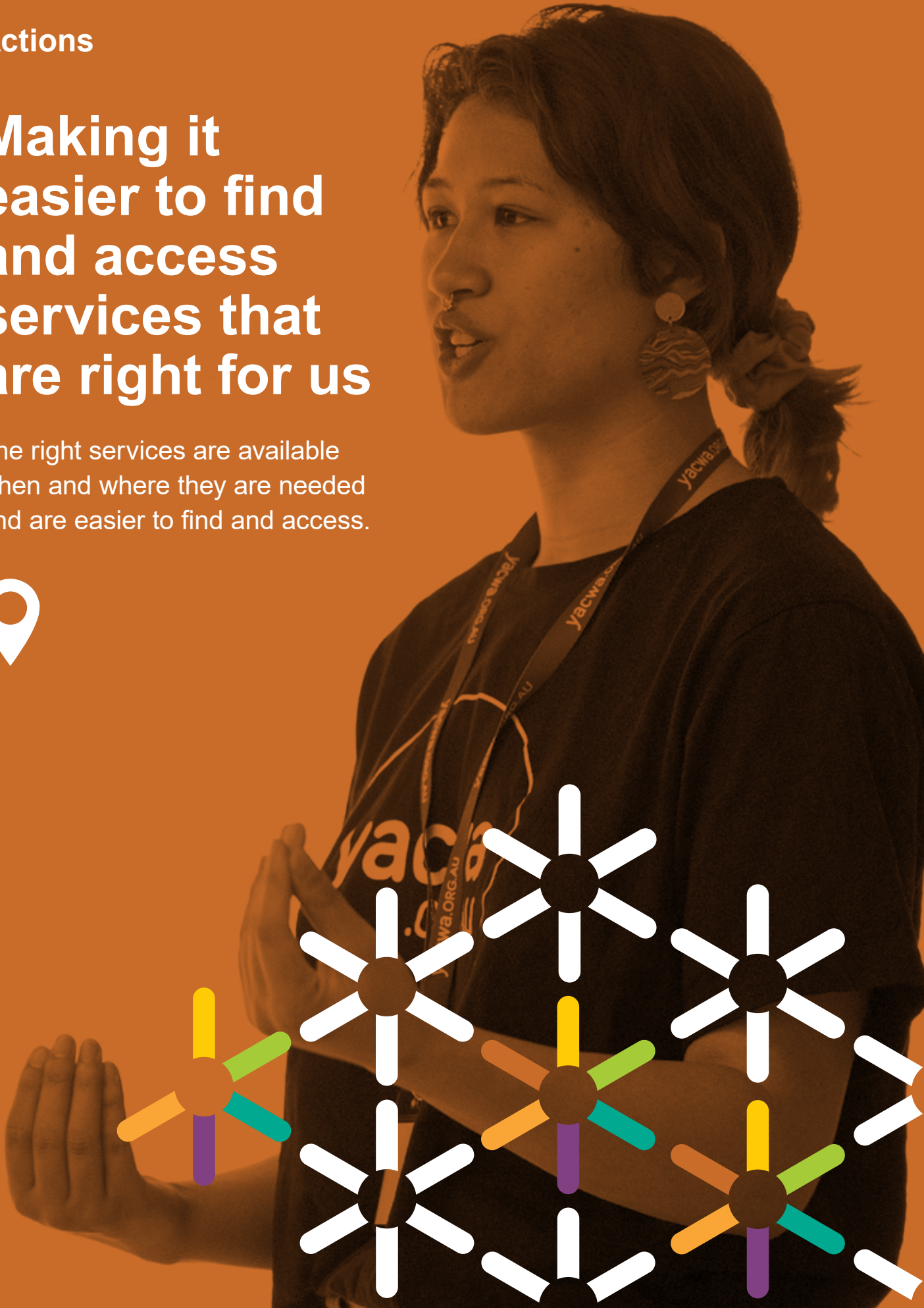
Travis McIver-Ball, 16, Armadale Senior High School



Actions

Making it easier to find and access services that are right for us

The right services are available when and where they are needed and are easier to find and access.



Immediate Actions

3.1 Youth Mental Health and AOD homelessness service

ACTION Open the interim youth mental health and AOD homelessness service.

UPDATE Funding for the Youth Mental Health and AOD Homelessness Service (interim and long term) was provided as part of the Western Australian Recovery Plan in 2020-21 (\$25.1 million over four years).

Refurbishment for the 8-bed facility in Queens Park (interim service), commenced in October 2021 and is anticipated to be completed in early 2022.

Both Richmond Wellbeing and East Metropolitan Health Service have recruited staff for the service and are currently finalising the Model of Service and Memorandum of Understanding.

The licensing requirements are being progressed and consultation with the local council and community is progressing. Stakeholder engagement began in December 2021 and assessment of referrals is set to commence in January 2022.

3.2 Youth mental health and AOD homelessness service

ACTION Engage young people to co-design the Model of Service and building for the long-term youth mental health and AOD homelessness service.

UPDATE Funding for the Youth Mental Health and AOD Homelessness Service (interim and long term) was provided as part of the Western Australian Recovery Plan in 2020-21 (\$25.1 million over four years).

Consultations to inform the long term Model of Service were held in February and March 2021. A range of stakeholders including young people, carers and family members, service providers, peak bodies and representatives from a number of Government agencies were involved in the consultations.

Consultations to inform building design will occur after land acquisition.

3.3 Youth mental health and AOD homelessness service

ACTION Construct and commission the long-term youth mental health and AOD homelessness service.

UPDATE MHC has worked with the Department of Communities to source a suitable site in the North Metropolitan area, which has now been identified. The process to acquire this land is underway.

Making it easier to find and access services that are right for us 3.1 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Health
Health Service Providers

Status In Progress

Completion Date Early 2022

Making it easier to find and access services that are right for us 3.2 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Health
Health Service Providers

Status In Progress

Completion Date 2022

Making it easier to find and access services that are right for us 3.3 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Communities
Department of Health
Health Service Providers

Status In Progress

Completion Date 2024

3.4 Telehealth emergency response service

ACTION Expand services to provide further mental health support and advice to young people up to the age of 18 years, their families, carers and other health professionals. This includes assistance regarding crisis management, assessment and referrals.

UPDATES 3.4a The Child and Adolescent Mental Health Services Emergency Telehealth Service was implemented in mid-2020. This project developed and implemented a single point of telehealth (telephone and video-call) contact for children in community settings requiring mental health support, brief intervention, and assessment. This includes children, families and professionals who contact the Emergency Telehealth Service from their home, schools, or GP's and children who have presented to metropolitan emergency departments. The service expanded upon the previous Urgent Telephone Helpline which did not utilise video calls or provide mental health assessments.

In November 2021, the service re-branded as Child and Adolescent Mental Health Services Crisis Connect to more accurately reflect the Model of Care which also provides face-to face mental health and risk assessment at the Perth Children's Hospital emergency department. This service is available 24 hours a day, 7 days a week.

3.5 One Stop Shop (now the System Navigation Pilot Project)

ACTION Pilot a project for system navigation, to assist young people, their families, carers and support people, as well as workers in and out of the mental health and AOD sector.

UPDATE A Pilot of a client centred, trauma informed model of service, which includes and values lived experience, began in July 2021. Partnerships were developed with specific agencies whose clients could benefit from transfer to another service for additional support. A process evaluation of the Pilot is due to be delivered to the MHC in January 2022.

3.6 Independent review

ACTION Commence an independent review of mental health services (community treatment and hospital) for young people aged 0 to 18 years.

UPDATE The Ministerial Taskforce into Public Mental Health Services for Infants, Children and Adolescents aged 0-18 years in Western Australia (the ICA Taskforce) is meeting monthly and is supported by three expert advisory groups and a project team. The lived experience, clinical and interagency expert advisory groups have all met and are helping to form a view of the current system and to identify the gaps. The ICA Taskforce is considering where new services are required and also where existing services can be reconfigured or enhanced.

The ICA Taskforce delivered its final report on 30 November 2021. This significant body of work is now before Government for consideration.

Making it easier to find and access services that are right for us 3.4a (Immediate action)

| | |
|------------------|--|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Health Health Service Providers |
| Status | Completed |
| Completion Date | July 2020 |

Making it easier to find and access services that are right for us 3.5 (Immediate action)

| | |
|------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Health Service Providers |
| Status | In Progress |
| Completion Date | July 2022 |

Making it easier to find and access services that are right for us 3.6 (Immediate action)

| | |
|------------------|--|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Health Health Service Providers |
| Status | Completed |
| Completion Date | November 2021 |

3.7 Help, support and navigation

ACTION Promote the state-wide Alcohol and Drug Support Line for young people and the Parent Family Drug Support Line and Parent Peer Network for their family members. These services include support by phone and live chat feature.

UPDATES 3.7a The two Support Lines and Parent Peer Network continue to be promoted in social media (MHC Facebook), Little Aussie Directory and Out in Perth magazine (LGBTQIA+ community).

3.7b State-wide expansion of Parent Family Drug Support Program will occur in a phased strategy over the next 4 years in both urban and regional areas. A website, app, online learning and groups will be developed. This expansion will include additional promotion of the existing two Support Lines and Parent and Peer Network.

3.8 Help, support and navigation

ACTION Ensure new service models include system navigation as a core component.

UPDATE The System Navigation Pilot Project is part of the broader reform of the mental health and AOD system. The aim is to provide a single point of entry mental health and AOD services for consumers, carers, community members and clinicians. The service will work closely with the Immediate Drug Assistance Coordination Centre and will assist individuals with mental health and AOD issues to access appropriate supports and services.

The System Navigation Pilot Project can provide young people with:

- Harm reduction and coping strategies
- Crisis support to young people and their family members
- Information and link to appropriate online resources
- Counselling and support
- Referral pathways and warm referral to services

3.9 Service delivery flexibility

ACTION Work with service providers to support young people, families, carers and support people to access services via both face to face and virtual methods of service delivery.

UPDATE Co-design is an integral part of any new service developed by MHC, for example the Safe Havens and the Youth Mental Health and AOD Homelessness service.

As referred to in Action 3.4, the Child and Adolescent Mental Health Service Crisis Connect provides phone and online videocall assessment and support for children and young people who are experiencing a mental health crisis, as well as support and advice to families, carers, and professionals in the community. The service has been available 24 hours per day, 7 days per week since November 2021.

Health Service Providers employ community health nurses who work with

Making it easier to find and access services that are right for us 3.7a (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies N/A

Status In Progress

Completion Date Ongoing

Making it easier to find and access services that are right for us 3.7b (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies N/A

Status In Progress

Completion Date 2024-25

Making it easier to find and access services that are right for us 3.8 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Communities
Department of Education
Department of Health
Department of Justice
Health Service Providers

Status In Progress

Completion Date July 2022

Making it easier to find and access services that are right for us 3.9 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Communities
Department of Education
Department of Health
Health Service Providers

Status In Progress

Completion Date Ongoing

school student service teams to provide information, support and referrals for individual young people and their families.

Child and Adolescent Mental Health Service teams have Community Education Liaison Teachers who work as liaison between Health and Schools in providing mental healthcare to the young people of school going age who might need mental health treatment.

The WA Country Health Service reports that the South West and Pilbara have had flexible youth service models in place since 2018.

The WA Country Health Service is currently drafting a principle-based youth clinical services framework that will support locally operationalised youth mental health models that work closely with other service providers.

The North Metropolitan Health Service Youth Mental Health Services is working with the Telehealth Unit to determine Key Performance Indicators for the telehealth service.

3.10 Pop-Up services

ACTION Explore the opportunities to create “pop-up” services in youth friendly locations, to support young people in accessing information and referrals.

UPDATE The North Metropolitan Health Service participates in annual events such as Homeless Connect Perth, Cyril Jackson Health Festival, In Your Head Youth Mental Health forum, to support young people to access information and referral pathways in youth mental health services. They attend weekly metropolitan Headspace sites to liaise with staff and young people about potential referrals into youth mental health services.

Youth Accommodation Liaison Clinical Nurse Specialist positions (YouthLink and Youth Reach South) provide capacity building for staff of crisis accommodation services, along with assessment and brief intervention for young people. YouthLink staff provide consultation to staff of Passages and Perth Inner City Youth Services to support at-risk young people. YouthLink host Hearing Voices Group for Youth, in conjunction with Richmond Wellbeing providing an accessible, welcoming venue with support from staff.

The WA Country Health Service Youth clinical services framework will support working in youth friendly environments. Further opportunities are to be explored.

In the Midwest, the Community Alcohol and Drug Services provide weekly AOD counselling sessions at Geraldton Headspace and in partnership with Headspace and Geraldton Regional Aboriginal Medical Service deliver “Back on Track”, a fortnightly program aimed at young Aboriginal men at risk of AOD and mental health issues. The Kimberley WA Country Health Service Community Alcohol and Drug Services provide weekly outreach in local parks in Kununurra in partnership with other local agencies.

The Northern Metropolitan Health Service Youth Mental Health Services participated in the BALANCE event for Mental Health Week, a celebration of the arts for Youth Mental Health consumers, and will host a smaller visual arts workshop co-ordinated by consumers in December 2021.

Making it easier to find and access services that are right for us 3.10 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Communities
Health Service Providers

Status In Progress

Completion Date Ongoing

3.11 Strengthened community treatment and emergency responses

ACTION Develop a system Roadmap and implementation plan that provides a clear vision of the community mental health and AOD treatment services and emergency response services that will best meet the needs of people in Western Australia.

UPDATE A discussion paper is currently being developed that will outline how services are currently operating and identify the key areas to be considered for designing an optimal system. Stakeholder feedback on the discussion paper will inform further consultation in the next stage of the project and the final Roadmap.

3.12 Principles for effective recovery support

ACTION Current services to adopt the principles for effective recovery support, as outlined in the Increasing and Improving Community Mental Health Supports in Western Australia Report¹² (safety, flattening power, belonging, welcoming and non discriminatory, choice and self-determination, social context, engagement, peer developed and peer led, collaboration, and evaluation).

3.12a The Child and Adolescent Mental Health Services is developing a system-wide model of service delivery for Family Peer Support Workers. Planning is underway to pilot the model across each of the Child and Adolescent Mental Health Services directorates, with recruitment expected to commence in early 2022.

3.12b The WA Country Health Service has employed Peer Support Workers in Kalgoorlie, Albany, Bunbury, Broome and Kununurra to support consumers and their carers in the recovery journey. This includes the establishment of The Safe Place in Kununurra where Peer Workers assist people to self-manage their distress and, if necessary, refer them to support services.

Consumer and Carer Advisory Groups and lived experience representatives are included at both local and organisational wide levels to provide an increased consumer and recovery focused view of service delivery.

Making it easier to find and access services that are right for us 3.11 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Health
Health Service Providers

Status In Progress

Completion Date August 2022

Making it easier to find and access services that are right for us 3.12a (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Health Service Providers

Status In Progress

Completion Date Early 2022

Making it easier to find and access services that are right for us 3.12b (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Health Service Providers

Status Completed

Completion Date Ongoing

¹² Kaleveld, L., Bock, C. and Seivwright, A. *Increasing and Improving Community Mental Health Supports in Western Australia*. Centre for Social Impact, The University of Western Australia (2020).

Top Priorities

3.13 Improvements in existing community treatment and hospital services

ACTION Address the outcomes of the independent review by improving services and creating seamless, supported transitions to youth and adult services.

UPDATE There are youth psychiatrists working with the WA Country Health Service in the South West and the Pilbara.

In the metropolitan area, implementation of the Active Recovery Team program at both Royal Perth Bentley Group and Armadale Kalamunda Group has begun.

The Youth Community Assessment and Treatment Team is being developed, in collaboration between the Northern Metropolitan Health Service, the Eastern Metropolitan Health Service and the Southern Metropolitan Health Service. These bodies are developing common Models of Care and reporting parameters

3.14 Dedicated youth mental health stream

ACTION Continue to work towards establishing a dedicated youth mental health stream for those aged 16 to 24 years in metropolitan and regional WA, including community treatment and inpatient services for people with complex, severe and persistent mental health issues, and building upon services currently working well (such as Youth Axis, YouthLink and YouthReach South).

UPDATE Each health service provider will have a Youth Community and Treatment Team. This is expected to begin April 2022.

The uplift to the youth programs (Youth Axis, YouthLink and YouthReach South) has a starting date from April 2022.

The YouthReach South is being transferred to the South Metropolitan Health Service, while continuing to provide a centralised triage service and to collaborate between youth community services. The Youth Project Working Group is meeting fortnightly to progress these initiatives.

Making it easier to find and access services that are right for us 3.13 (Top priority action)

Lead Agency Mental Health Commission

Partner Agencies Health Service Providers

Status In Progress

Making it easier to find and access services that are right for us 3.14 (Top priority action)

Lead Agency Mental Health Commission

Partner Agencies Department of Health
Health Service Providers

Status In Progress

3.15 Assertive post discharge treatment and support

ACTION Establish intensive community treatment for young people with complex needs, and support for their families.

UPDATE The Active Recovery Team is embedded in the existing Youth Community Assessment and Treatment Team to provide support for young people up to 90 days.

3.18 Forensic services for young people

ACTION Develop a child, adolescent and youth forensic outreach service for those at risk of, or with a history of offending.

UPDATE The 2021-22 Budget saw \$12.6 million allocated to establish a new Child, Adolescent and Youth Forensic Outreach Service.

The Child Adolescent and Youth Forensic Outreach Service had the first Implementation Group meeting in October 2021. Work on the Model of Care has commenced.

3.19 Eating disorders

ACTION Expand specialised eating disorder services for young people, especially those aged 16 years and over.

UPDATE Planning has commenced for the Western Australian Eating Disorder Treatment Specialist Services and is expected to commence operation in July 2022.

The Western Australian Eating Disorder Treatment Specialist Services includes:

- Two dedicated multidisciplinary area based state-wide services, located in the north and south metropolitan area, providing a triage service;
- Intensive day programs;
- Intensive clinical monitoring to provide support to people in the community; and
- Specialist multidisciplinary outpatient clinics that includes a step-down service for inpatients with eating disorders.

Patient transition coordinators will also be located at each Health Service Provider to coordinate the care of people living with eating disorders.

In addition to this, there will be increases in Community Services, including community treatment and support services as well as early identification, intervention and prevention all form part of the expansion. The Western Australian Eating Disorder Treatment Specialist Services will also be expanded.

The Eating Disorder State-wide Project Group finalised the Model of Service in November 2021.

Making it easier to find and access services that are right for us 3.15 (Top priority action)

Lead Agency Mental Health Commission

Partner Agencies Health Service Providers
Department of Health

Status In Progress

Making it easier to find and access services that are right for us 3.18 (Top priority action)

Lead Agency Mental Health Commission

Partner Agencies Department of Health

Status In Progress

Making it easier to find and access services that are right for us 3.19 (Top priority action)

Lead Agency Mental Health Commission

Partner Agencies Health Service Providers

Status In Progress

3.21 Co-occurring mental health and autism

ACTION Establish a specialist autism and mental health service.

UPDATE Planning has begun to expand the already existing Model of Care. A survey was carried out from 1 November to 1 December 2021, asking questions about what should be included in a service, and consultation is ongoing.

3.22 The first phase of A Safe Place

ACTION Accommodation and support strategy to be implemented:

- Provide psychosocial support packages.
- Establish a youth mental health and AOD short-stay service which is residential with clinical and psychosocial supports.
- Establish a youth long term housing and support program, with coordinated clinical and psychosocial support.
- Increase AOD workers in youth accommodation and support services.

UPDATE Initial planning, including combined consultation to inform the development of Models of Service has been completed for the psychosocial support package, the youth long term housing and support program and the Step Up Step Down program. The final consultation report is expected early November 2021, following which Models of Service will be drafted.

It is anticipated the psychosocial support package will be available from mid-2022, youth long term housing and support from late-2022 and the youth Step Up Step Down program from mid-2024.

Initial planning for the expansion of the AOD education program to provide Drug Education Support Services workers at Youth Accommodation and Support Services in Western Australia has commenced. Consultations to inform the Model of Service took place in October and November 2021, including a face to face workshop with all Youth Accommodation and Support Services providers.

It is anticipated delivery of Drug Education Support Services workers in the Youth Accommodation and Support Services will commence in July 2022.

3.23 Expand treatment and support for young people with AOD issues

ACTION Expand existing Community Alcohol and Drug Services to provide dedicated support and treatment for young people.

UPDATE The target age group for youth accessing the Community Alcohol and Drug Services was expanded on 1 July 2021, so that it is now possible to enter at 12 years rather than 14 years.

Making it easier to find and access services that are right for us 3.21 (Top priority action)

| | |
|------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Health Service Providers |
| Status | In Progress |

Making it easier to find and access services that are right for us 3.22 (Top priority action)

| | |
|------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | N/A |
| Status | In Progress |

Making it easier to find and access services that are right for us 3.23 (Top priority action)

| | |
|------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | N/A |
| Status | In Progress |

3.24 Expand treatment and support for young people with AOD issues

ACTION Continue specialist youth AOD workers in the Pilbara Region and the South East Metropolitan area.

UPDATE Recurrent funding has been secured for specialist youth worker positions in the Pilbara and South East Metropolitan region.

3.26 After hours support

ACTION Increase after hours support for young people and their families through amending hours of operation of existing services.

UPDATE The Child and Adolescent Mental Health Service Crisis Connect service commenced 24/7 access from 1 November 2021.

The new Youth Community and Treatment Team service model has an after hours service that is due to begin April 2022.

3.28 Service modalities

ACTION Provide more options to young people regarding accessing services, including telehealth, video and other technology-based approaches.

UPDATE Telehealth is business as usual, but was expanded in 2020 and 2021 as a result of COVID-19.

The Child and Adolescent Mental Health Service uses an Emergency Telehealth Service and it is being considered in other program delivery.

3.29 After Care services

ACTION Expand services that provide after care support for young people who have presented to an emergency service following a suicide/self-harm attempt.

UPDATE In response to the anticipated impact of COVID-19 the State Government provided \$4.8 million over two years additional funding to increase the service provision of support after care and postvention services. This was part of the Expanded Suicide Prevention Action Plan intended as an immediate recovery response plan to COVID-19.

Making it easier to find and access services that are right for us 3.24 (Top priority action)

| | |
|------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | N/A |
| Status | Completed |

Making it easier to find and access services that are right for us 3.26 (Top priority action)

| | |
|------------------|--|
| Lead Agency | Health Service Providers |
| Partner Agencies | Department of Health Mental Health Commission |
| Status | In Progress |

Making it easier to find and access services that are right for us 3.28 (Top priority action)

| | |
|------------------|--|
| Lead Agency | Health Service Providers |
| Partner Agencies | Department of Health Mental Health Commission |
| Status | In Progress |

Making it easier to find and access services that are right for us 3.29 (Top priority action)

| | |
|------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Health Service Providers |
| Status | In Progress |

3.30 Support for people with personality disorders

ACTION Develop and implement overarching principles as the underpinnings of a system wide culture of care for people with personality disorders.

UPDATE On 20 July 2021 a launch event for the Statewide Model of Care for Personality Disorders Final Report 2020, was held to recognise the final report and all who contributed to its development.

The report was produced by the Western Australian Association for Mental Health, in consultation with the Mental Health Network and the Personality Disorders Mental Health Sub-Network. The report includes principles to guide prevention, care, service development and service delivery for people with personality disorder; a 'Staged Pathway' Model of Care; identification of service needs across the life course; strategies to address the needs of specific populations (such as Aboriginal people, rural and remote); and a recommended implementation approach for the Model of Care.

3.31 Support for people with personality disorders

ACTION Review existing service guidelines, and pathways for young people with emerging personality disorder and increase access to evidence-based treatment.

UPDATES 3.31a Existing guidelines have been reviewed and planning has commenced.

3.31b A multi-disciplinary Child and Adolescent Mental Health Service clinical reference group reviewed existing guidelines for Emotionally Unstable Personality Disorder in early adolescence. The findings and recommendations from this review were formally communicated to relevant stakeholders, including the MHC and Office of the Chief Psychiatrist.

3.32 Support for at-risk and disengaged young people in the Kimberley, through implementing the Kimberley Juvenile Justice Strategy

ACTION Increase the reach of intensive support across the Kimberley through Local Aboriginal Controlled Community Organisations.

This action is linked to action 5.24.

UPDATE Funding for the Kimberley Juvenile Justice Strategy is a continuation of commitments from the 2017 election. \$7.8 million in additional funding was allocated to the Kimberley Juvenile Justice Strategy in the 2021-22 Budget.

The Kimberley Juvenile Justice Strategy funds a range of community-led initiatives, including night patrol and safe place activities.

As part of the 2021-22 Budget, funding has been allocated for a collaborative project designing an on-country residential facility in Broome as an alternative to detention, targeted at young people who are at risk or involved in the justice system.

Making it easier to find and access services that are right for us 3.30 (Top priority action)

| | |
|------------------|--|
| Lead Agency | Department of Health |
| Partner Agencies | Health Service Providers Mental Health Commission |
| Status | In Progress |

Making it easier to find and access services that are right for us 3.31a (Top priority action)

| | |
|------------------|--|
| Lead Agency | Health Service Providers |
| Partner Agencies | Department of Health Mental Health Commission |
| Status | In Progress |

Making it easier to find and access services that are right for us 3.31b (Top priority action)

| | |
|------------------|--------------------------|
| Lead Agency | Department of Health |
| Partner Agencies | Mental Health Commission |
| Status | Completed |

Making it easier to find and access services that are right for us 3.32 (Top priority action)

| | |
|------------------|--|
| Lead Agency | Department of Justice |
| Partner Agencies | Department of Communities Department of Education Department of Health Department of the Premier and Cabinet Department of Training and Workforce Development Department of Treasury Kimberley Development Commission Health Service Providers Mental Health Commission WA Police |
| Status | In Progress |

Future Steps

3.38 Identify actions for a longer-term plan to implement a Safe Place

ACTION A Western Australian strategy to provide safe and stable accommodation, and support to people experiencing mental health, alcohol and other drug issues 2020-2025.

UPDATE A working group has been established and a consultation paper is being developed.

Making It Easier to Find and Access Services that are Right for Us 3.38 (Future action)

Lead Agency Mental Health Commission

Partner Agencies Department of Communities

Status In Progress



Freya Dunn, 16, Armadale Senior High School

Actions

Valuing that we are all unique

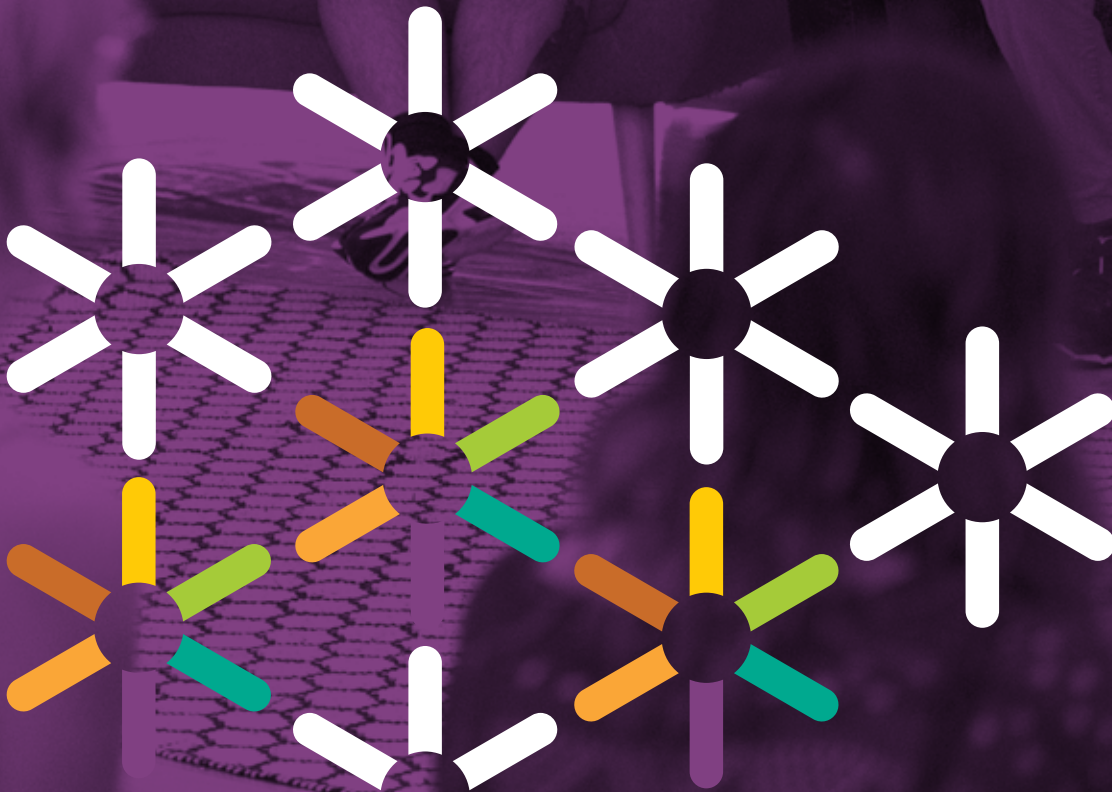
Diversity and culture is respected, nurtured and catered for at every point, ensuring services and workforces are welcoming, inclusive, culturally safe, person-centred and holistic.



Government of Western Australia
Mental Health Commission

Our Vision

A Western Australian community that experiences minimal alcohol and other drug-related harms and optimal mental health



Immediate Actions

4.1 Kimberley Youth AOD, and co-occurring mental health service

ACTION Finalise the co-design of the model of service. Commission the Kimberley youth AOD and co-occurring mental health service.

UPDATES 4.1a Co-design of the Model of Service was completed in December 2020. The model has seven components ranging from prevention through to intensive support.

4.1b MHC has undertaken a gaps analysis and prioritisation of the service model components in consultation with key stakeholders. The Department of Justice worked with MHC through the Kimberley Juvenile Justice Strategy Senior Officers Group to conduct a second phase of a service mapping exercise in the Kimberly region. This mapping exercise has been instrumental in informing which supports should be prioritised through the Kimberley Youth AOD project.

4.2 Representation of young people on mental health and AOD advisory committees

ACTION Representation of young people on mental health and AOD advisory committees is increased:

- Aboriginal young people
- Young people from CaLD communities
- Young people from LGBTQIA+ communities.

UPDATE This is an ongoing initiative which will consider the three mentioned groups of young people as well as others where relevant, such as young people from regional and remote areas.

The WA Country Health Service Cultural Governance Framework continues to involve Aboriginal young people and representatives from their diverse communities across the regions (such as Kimberley youth councils and Child and Adolescent Mental Health Services advisory groups).

The Midwest WA Country Health Service - Community Alcohol and Drug Service are part of a group consortium in Geraldton to increase services to young LGBTQIA+ people and will assist with the development and delivery of a safe space drop in centre.

Making it easier to find and access services that are right for us 4.1a (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Communities
Department of Education
Department of Justice

Status Completed

Completion Date December 2020

Making it easier to find and access services that are right for us 4.1b (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Communities
Department of Education
Department of Justice

Status In Progress

Completion Date Mid-2022

Making it easier to find and access services that are right for us 4.2 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Health Service Providers

Status In Progress

Completion Date Ongoing

The North Metropolitan Health Service Mental Health, Public Health and Dental Services Youth Mental Health Youth Reference Group reports young people are involved in:

- Local service level initiatives (for example, reviews of youth mental health clinics and fostering a welcoming and inclusive culture);
- Expert panels including the Review of the Clinical Governance of Public Mental Health Services in WA; and
- National and international mental health conferences.

In January 2021, the Child and Adolescent Mental Health Service convened a long-term Lived Experience Group that includes young people from diverse backgrounds which continues to meet monthly.

4.3 Build relationships

ACTION Youth mental health services develop sustainable, trusting and meaningful relationships with Aboriginal communities by working with Elders and Aboriginal young people to negotiate priorities.

UPDATES The North Metropolitan Health Service Youth Mental Health Services have been engaging with Elders and Aboriginal young people since 2014 with the Looking Forward Project, and 2017 onwards through the Building Bridges Project.

The Kimberley WA Country Health Service are currently funded to provide an Aboriginal Youth Wellbeing service and are establishing Local Cultural Governance Groups to strengthen local relationships and collaborations.

The Midwest WA Country Health Service have strong connections with the local Aboriginal community and members of the Community Alcohol and Drug Services attend meetings such as Meekatharra Aboriginal Reference Group, Southern Yamatji Native Title group and Yamatji Women’s Network. The Community Alcohol and Drug Services also attend regular meetings with an Aboriginal Elders Advisory group and have formed a partnership with Geraldton Sporting Aboriginal Corporation to deliver mentoring and workshops to young Aboriginal people on school holiday programs.

The Child and Adolescent Health Service is working with the Reflect on Reconciliation Action Plan to strengthen relationships with internal and external stakeholders. A key activity is the implementation of an Aboriginal Cultural Security Review of the service with involvement from staff, consumers, carers and community members. Aboriginal Health Practitioner Project will be ideally placed to provide culturally safe, holistic health care, education and health promotion through engagement with Aboriginal communities and developing trusting relationships within Aboriginal communities and health services.

Making it easier to find and access services that are right for us 4.3 (Immediate action)

| | |
|-------------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Health Service Providers |
| Status | In Progress |
| Completion Date | Ongoing |

Top Priorities

4.4 National Disability Insurance Scheme

ACTION Provide increased supports for people to test their National Disability Insurance Scheme eligibility.

UPDATE In 2020-21 the West Australian Government allocated \$8 million to advocacy for people with disability and their families.

\$4.56 million was directly allocated to existing advocacy providers to continue to achieve outcomes for people requiring independent and specialist advocacy services. This included providing support to people to navigate the National Disability Insurance Scheme.

The Department of Communities released the remaining \$3.44 million via competitive tender.

The tender process sought projects which would increase the capacity of people with disability, their families and carers, and local champions within the community, to advocate for improved outcomes for people with disability, including access to services.

The Western Australian Government also funded a two year pilot initiative to support young people aged between 13 and 30 to access an autism diagnosis and (if diagnosed) facilitate their access to the National Disability Insurance Scheme.

4.7 Culturally secure services

ACTION Invest in Aboriginal Community-Controlled Health Services Social and Emotional Wellbeing programs, developed and led by Aboriginal people and their communities, across all regions of the state.

UPDATE MHC has engaged with the Aboriginal Health Council of Western Australia and their member services to identify locations for trial sites and to establish the evaluation framework. The trial will commence 1 July 2022 and run for two and a half years.

Valuing that we are all unique 4.4 (Top priority action)

Lead Agency Department of Communities

Partner Agencies Mental Health Commission

Status In Progress

Valuing that we are all unique 4.7 (Top priority action)

Lead Agency Department of Health

Partner Agencies Mental Health Commission

Status In Progress

4.12 Racism, stigma and discrimination is reduced

ACTION Build the skills and knowledge of the mental health and AOD, as well as the broader health and human services workforce, to decrease stigma and discrimination experienced by young people and their families, including those with diverse backgrounds and experiences.

UPDATE Work to support this action is undertaken by the Department of Health (Cultural Diversity Unit), and is linked to progressing Recommendation 3b of the Sustainable Health Review.

The WA Country Health Service has launched its Cultural Governance Framework which places Cultural Governance alongside Clinical and Organisational Governance to address systemic racism and ensure that culturally secure practice is embedded across the agency. An implementation plan will be developed.

Regionally, WA Country Health Service Mental Health teams are involved with Aboriginal Planning Forums and other Elder groups to ensure access and equity of service to Aboriginal communities.

Valuing that we are all unique 4.12 (Top priority action)

| | |
|-------------------------|--|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Health Department of Local Government, Sport and Cultural Industries |
| Status | In Progress |

4.14 Racism, stigma and discrimination is reduced

ACTION Upskill the mental health and AOD workforce to improve and strengthen their capability to effectively provide LGBTQIA+ inclusive and accessible services and supports that are free from stigma and discrimination.

UPDATE The WA Government has a number of election commitments with regards to LGBTQIA+ Policy, one of which includes implementation of the WA LGBTI Health Strategy 2019-2024.

A Strategy Check-up Survey was recently conducted, to provide a snapshot of the level of awareness of the Strategy and implementation across health services since its publication in 2019. The survey aims to identify areas of excellence as well as gaps within Western Australian health services. Close to 300 responses were received. Preliminary analyses indicates that the main areas of implementation focus for Health Service Providers are education/training for staff, data (including forms, databases) and awareness of Strategy.

Valuing that we are all unique 4.14 (Top priority action)

| | |
|-------------------------|--------------------------|
| Lead Agency | Department of Health |
| Partner Agencies | Mental Health Commission |
| Status | In Progress |

4.15 Support for LGBTQIA+ youth

ACTION Expand peer support weekend workshops for LGBTQIA+ youth, to help young people build practical skills relating to mental health and wellbeing, including suicide prevention.

UPDATE MHC continues to support and expand programs that meet the mental health and wellbeing needs of LGBTQIA+ youth.

The Suicide Prevention Framework 2021-2025 includes support to the WA AIDS Council.

In 2021-22, weekend workshops were also held to improve mental health outcomes for participants, with a particular emphasis on providing this service for LGBTQIA+ young people who live in regional and rural areas.

Valuing that we are all unique 4.15 (Top priority action)

| | |
|-------------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | N/A |
| Status | In Progress |

4.18 Peer workers

ACTION Fund youth peer support programs for LGBTQIA+ young people, young people from refugee and/or migrant backgrounds, Aboriginal young people, and young people living with disability.

UPDATE The Department of Communities partners with the Youth Affairs Council of Western Australia to support the Youth Pride Network.

Through its advocacy funding, The Department of Communities also supported a disability sector organisation to co-design a project to build the advocacy capacity of people with disability, their families/carers and the wider community through training and mentoring.

4.19 Regional services

ACTION Improve access and availability of mental health and AOD services (including social and emotional wellbeing) that are culturally appropriate, require minimal travel and are youth-focussed in regional and remote services.

UPDATE Initial planning for the expansion of the AOD Education and Support Program to provide Drug Education Support Service workers at Youth Accommodation and Support Services in Western Australia has commenced.

It is anticipated that Drug Education Support Service workers will be provided in each Youth Accommodation and Support Service from July 2022.

MHC has engaged with the Aboriginal Health Council of Western Australia and their member services to identify locations for the Social and Emotional Wellbeing Model of Service pilot sites. The trial will commence early 2022 and run for two and a half years.

Valuing that we are all unique 4.18 (Top priority action)

Lead Agency Department of Communities

Partner Agencies N/A

Status In Progress

Valuing that we are all unique 4.19 (Top priority action)

Lead Agency Mental Health Commission

Partner Agencies Health Service Providers

Status In Progress



Jessica Xie Moulton, 15, (she/her) Bunbury Senior High School



Actions

Services working together

There is a partnership approach to recovery with better coordination and transition between and across sectors, services and life stages.



Immediate Actions

5.1 Expo

ACTION Investigate options to establish a service provider expo to help facilitate relationship building between services to promote consortiums.

UPDATE The Expo will give Providers the opportunity to present information stalls with the aim of brokering partnerships to aid the development of Memorandums of Understanding between Providers. Discussions are ongoing with the Department of Communities.

Other consortia arrangements already exist, such as that between the WA Country Health Service, Headspace and the WA Primary Health Alliance.

5.2 Co-location

ACTION Identify opportunities to commission mental health and AOD services that support the co-location of services wherever possible.

UPDATE A new youth Active Recovery Team in the south metropolitan area has co-located AOD and mental health services. The interim Youth Mental Health and AOD Homelessness Service referred to in action 3.1 is due to open in Queens Park in early 2022. The Youth Mental Health and AOD Step Up Step Down service, which is expected to open in 2024 will also support young people with co-occurring mental health and AOD issues. Further relevant projects will be identified as appropriate.

5.3 Screening and case management of young people at risk of suicide

ACTION Develop a collaborative inter-agency approach, including a shared screening tool and a joint case management approach for young people with multiple risk factors for suicide.

UPDATES 5.3a The Child and Adolescent Mental Health Service provides assessment, counselling, support and case management in collaboration with the Department of Health and other agencies as outlined in the Schools Response and Planning Guidelines for Students with Suicidal Behaviour and Non-Suicidal Self-Injury.

5.3b The WA Country Health Service is developing and implementing the MR23 Cultural Information Gathering Tool across the WA Country Health Service for cultural assessments that inform the care management of Aboriginal people.

Services working together 5.1 (Immediate action)

| | |
|-------------------------|--|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Communities Department of Education Department of Health Health Service Providers |
| Status | In Progress |
| Completion Date | June 2022 |

Services working together 5.2 (Immediate action)

| | |
|-------------------------|---|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Communities Health Service Providers |
| Status | In Progress |
| Completion Date | Ongoing |

Services working together 5.3a (Immediate action)

| | |
|-------------------------|---|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Education Health Service Providers |
| Status | In Progress |
| Completion Date | 2022 |

Services working together 5.3b (Immediate action)

| | |
|-------------------------|---|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Education Health Service Providers |
| Status | In Progress |
| Completion Date | December 2022 |

Services working together

5.3c Suicide prevention and intervention is being considered in the work of the Infants, Children and Adolescents Taskforce (ICA Taskforce). An Interagency Expert Advisory Group advises the Taskforce. Membership is from non-Government organisations and other Government agencies who have an interaction with the mental health system for people aged 0 to 18 years. The ICA Taskforce delivered its final report on 30 November 2021. This significant body of work is now before Government for consideration.

5.3d The Child and Adolescent Health Service employs community health nurses who support individual students with the Schools Response and Planning Guidelines for Students with Suicidal Behaviour and Non-Suicidal Self Injury.

5.4 Co-occurring mental health and AOD

ACTION Progressively review all relevant existing models of service and procurement processes so that co-occurring mental health and AOD issues are addressed by a single service or a consortium of services, or effective pathways between different services are established.

UPDATE Health Service Providers have progressed a range of initiatives which relate to the intent of this initiative including:

- The Youth Interagency Comorbidity Committee – consortium established with Youth Mental Health, Drug and Alcohol Youth Service and Mission Australia to ensure effective pathways for young people to access treatment.
- The Eastern Metropolitan Health Service led State-wide Walk With Me project. The Walk With Me Project, funded through the Methamphetamine Action Plan, has produced a Recommendation Report which includes establishing hospital based AOD service model to meet the needs of high/complex medical withdrawal, improving access to AOD treatment with suggested process and pathway change, and improving partnerships and pathways for a unified sector.
- Development of an East Metropolitan Health Service Community Mental Health Dual Diagnosis Model of Care, Options paper and Pilot Plan.
- New models of service being developed with formal AOD components such as Active Recovery Teams, Youth Homelessness, and Youth Step Up Step Down. This is anticipated to be captured in reporting templates for the Service Agreements.

5.5 Co-occurring mental health and AOD

ACTION Adopt processes and guidelines for addressing co-occurring mental health and AOD issues in an integrated way, learning from those that have been established and applied in other States and Territories.

UPDATE In developing new models of service, MHC is ensuring that, where appropriate, there are formal AOD components built in, to address co-occurring mental health and AOD issues in an integrated way.

Services working together 5.3c (Immediate action)

| | |
|-------------------------|---|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Education Health Service Providers |
| Status | In Progress |
| Completion Date | Ongoing |

Services working together 5.3d (Immediate action)

| | |
|-------------------------|--|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Education. Health Service Providers |
| Status | In Progress |
| Completion Date | Ongoing |

Services working together 5.4 (Immediate action)

| | |
|-------------------------|--------------------------|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Health Service Providers |
| Status | In Progress |
| Completion Date | Ongoing |

Services working together 5.5 (Immediate action)

| | |
|-------------------------|---|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Communities Department of Education Department of Health Department of Justice |
| Status | In Progress |
| Completion Date | Ongoing |

5.6 Transition between services

ACTION Ensure transition pathways are supportive and discharge pathways commence soon after admission.

UPDATES 5.6a The State-wide Standardised Clinical Documentation for Mental Health Services Policy mandates documents that will assist with discharge planning, involvement of family, carers and consumers, and transfer of care information.

5.6b The Western Australian Youth Health Policy 2018-2023 toolkit links young people, parents and carers to a transition readiness checklist and Child and Adolescent Health Service transition support information.

The following services and programs are being embedded, including the Youth Community and Treatment Team, Youth Individualised Community Living Strategy, Youth Step Up Step Down, and Youth Mental Health and AOD Homelessness Service.

Through the co-design process to develop new or expand existing youth services/programs, MHC is exploring the scope of appropriate involvement of family and carers.

Services working together 5.6a (Immediate action)

| | |
|-------------------------|--------------------------|
| Lead Agency | Department of Health |
| Partner Agencies | Health Service Providers |
| Status | Completed |
| Completion Date | 2021 |

Services working together 5.6b (Immediate action)

| | |
|-------------------------|--------------------------|
| Lead Agency | Department of Health |
| Partner Agencies | Health Service Providers |
| Status | Completed |
| Completion Date | 2021 |

5.7 Transition between services

ACTION Ensure transition pathways involve families and carers where appropriate.

UPDATES 5.7a The State-wide Standardised Clinical Documentation for Mental Health Services Policy mandates documents that will assist with discharge planning, involvement of family, carers and consumers, and transfer of care information. The policy has been in place since 2014 and was reviewed, with the updated version released in 2021.

5.7b The Western Australian Youth Health Policy 2018-2023 toolkit links young people, parents and carers to a transition readiness checklist and the Child and Adolescent Health Service transition support information.

Services working together 5.7a (Immediate action)

| | |
|-------------------------|--------------------------|
| Lead Agency | Department of Health |
| Partner Agencies | Health Service Providers |
| Status | Completed |
| Completion Date | 2021 |

Services working together 5.7b (Immediate action)

| | |
|-------------------------|--------------------------|
| Lead Agency | Department of Health |
| Partner Agencies | Health Service Providers |
| Status | In Progress |
| Completion Date | Ongoing |

5.8 Transition between services

ACTION Ensure admission, referral, discharge and transfer policies, practices and procedures of mental health services meet the cultural needs of Aboriginal children and young people.

UPDATES The Child and Adolescent Mental Health Service is completing an Aboriginal Cultural Security Review designed to increase the level of cultural security for consumers, carers and staff.

Services working together 5.8 (Immediate action)

| | |
|-------------------------|--------------------------|
| Lead Agency | Department of Health |
| Partner Agencies | Mental Health Commission |
| Status | In Progress |
| Completion Date | 2022 |

5.9 Transition between services

ACTION Ensure referral pathways, relationships and collaborations between State and Commonwealth agencies and services are established and fostered.

UPDATES 5.9a The National Cabinet tasked the Health National Cabinet Reform Committee with developing the new National Agreement for Mental Health and Suicide Prevention as their first priority by November 2021. Western Australia is working on the development of the National Agreement with the Commonwealth, States and Territories. It is anticipated that this will include the identification of opportunities to further support the interactions between State and Commonwealth agencies and services.

5.9b The Western Australian Youth Health Policy 2018-2023 toolkit links young people, parents and carers to a transition readiness checklist and the Child and Adolescent Health Service transition support information.

5.10 Transition between services

ACTION Actively seek out partnerships and networking with local GPs to establish better relationships to facilitate communication and transitions.

UPDATE The Office of the Chief Medical Officer has developed a Draft Medical Workforce Mental Health Action Plan which is currently under consultation with a stakeholder group. This will feed into the Mental Health Workforce Planning Project currently in progress.

This plan includes provision for alternative models of care, including upskilling of the GP workforce in mental health treatment, management and collaboration with psychiatry and other workforce mental health teams.

Services working together 5.9a (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Health

Status In Progress

Completion Date 2022

Services working together 5.9b (Immediate action)

Lead Agency Department of Health

Partner Agencies Health Service Providers

Status In Progress

Completion Date Ongoing

Services working together 5.10 (Immediate action)

Lead Agency Health Service Providers

Partner Agencies Department of Health

Status In Progress

Completion Date 2024

5.11 Children in care and care leavers

ACTION Explore initiatives to address specific and complex health, psychological, housing, educational and employment needs for children in care and care leavers (child protection), including implementation of the Rapid Response Framework.

UPDATE The Department of Communities is exploring a number of initiatives to address specific and complex needs for children in care and care leavers including:

- Home Stretch – a service model designed to provide enhanced access to services and supports for eligible young people aged 18 to 21, who are transitioning from out of home care including one-on-one transition support, accommodation allowance, education/ training and employment supports, health and mental health support, financial support and a support circle of people. The permanent roll out of Home Stretch was announced in the 2021-22 Budget.
- Rapid Response Framework and associated legislative changes – Rapid Response is a 2009 Cabinet endorsed cross Government initiative to help address specific and complex health, psychological, housing, education and employment needs of children in out of home care and care leavers. The Department of Communities is working with agencies to support the implementation of proposed amendments to *s.22 of the Children and Communities Services Act 2004* (the Act) that will introduce new powers whereby public authorities must prioritise a request for assistance for children in care, children under a protection order, and care leavers. The Department of Communities is also working with agencies to identify issues that currently affect the delivery of agency specific services to children in care and care leavers, and exploring opportunities to improve referral processes and services responses.
- All Paths Lead to a Home: Western Australia’s 10-Year Strategy on Homelessness: Ensuring that people exiting Government services (including young people leaving care) are better connected to housing and appropriate support services is one of the priority actions of the Strategy. The first five year Action Plan under the Strategy includes expanding targeted support programs for young people who are transitioning from out-of-home care to independent living which will be met through the expansion of the Home Stretch program.
- Western Australian Housing Strategy 2020 – 2030 - Young people aged 18 to 25 were identified in the Western Australian Housing Strategy 2020 – 2030 as a cohort for which tailored housing responses were required. The Strategy identifies the desired outcome for young people as being supported in their housing choices. Specific initiatives as to how this outcome will be achieved, including supporting children leaving care, will be outlined in the Western Australian Housing Strategy’s implementation plans, which are due for release by the end of 2021.
- The Housing application pathway for young people leaving care sets out a process to be used during the leaving care planning process

Services working together 5.11 (Immediate action)

| | |
|-------------------------|--|
| Lead Agency | Department of Communities |
| Partner Agencies | Department of Education Department of Health Department of Justice Mental Health Commission |
| Status | In Progress |
| Completion Date | Various implementation dates |

Services working together

to complete an initial housing application for us to review and list a young person for housing assistance. Young people still have to meet eligibility criteria, but this enables the Department of Communities to consider the suitability of potential housing options in accordance with their specific situation. The process is internal to the Department of Communities and is reviewed and updated as necessary in line with the review of the Rapid Response framework.

5.12 Better Data

ACTION Improve the timeliness and publication of data on suicide, suicide attempts and self-harm by children and young people.

UPDATE Discussions to progress this action have commenced between the MHC, the Office of the State Coroner and the Department of Health.

Data on suicide, suicide attempts and self-harm by children and young people has been used to inform specific projects led or supported by the MHC.

5.14 Local Government

ACTION Work with the Western Australian Local Government Association and Department of Local Government, Sport and Cultural Industries to promote awareness of mental health and AOD issues through relevant community groups.

UPDATE The Public Health Planning Reference Group is working to establish information to inform local governments of the key priority issues that they may consider addressing in the public health plans. This reference group includes representation from MHC and the Western Australian Local Government Association.

Progress on this is linked to work supporting both the State Public Health Plan and YPPA action 2.3.

The Department of Local Government, Sport and Cultural Industries supports the promotion and awareness of mental health and AOD issues and will identify potential opportunities for promotion with local governments in collaboration with Western Australian Local Government Association and Local Government Professionals WA.

Services working together 5.12 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Health

Status In Progress

Completion Date Ongoing

Services working together 5.14 (Immediate action)

Lead Agency Mental Health Commission

Partner Agencies Department of Local Government,
Sport and Cultural Industries

Status In Progress

Completion Date Ongoing

5.15 Collaborative Action

ACTION Continued development of Joint Regional Plans to:

- make better use of existing mental health resources.
- improve sustainability across the health system.
- enhance mental health service delivery across the State.

UPDATES 5.15a The Western Australian Foundational Plan for Mental Health, Alcohol and Other Drug Services and Suicide Prevention was released in November 2021.

5.15b Comprehensive Joint Regional Plans are currently in development and are anticipated to be completed by June 2022. The Plans will be informed by the National Agreement for Mental Health and Suicide Prevention.

A Rural Psychiatry Training Roadmap has been developed through the Royal Australian and New Zealand College of Psychiatrists. This will increase the opportunities to train and develop the rural psychiatry workforce.

Services working together 5.15a (Immediate action)

Lead Agency WA Primary Health Alliance

Partner Agencies Health Service Providers
Mental Health Commission

Status Completed

Completion Date November 2021

Services working together 5.15b (Immediate action)

Lead Agency WA Primary Health Alliance

Partner Agencies Health Service Providers
Mental Health Commission

Status In Progress

Completion Date June 2022



Amber Philp, 16, Armadale Senior High School – Age of Emotion



Top Priorities

5.16 Court Diversion

ACTION Embed the mental health court diversion services for young people in contact with the criminal justice system.

UPDATE In the 2021-22 Budget the Government approved additional funding on an ongoing basis for the Mental Health Court Diversion and Support Program.

5.19 Peer workers

ACTION Establish system navigation/youth workers and/or youth mentors in emergency departments to support people and smooth transition to community system.

UPDATE Peer Workers at Fiona Stanley Hospital support those aged over 16 who present to the emergency department and are embedded in the Youth Community Assessment and Treatment Team.

5.20 Children in care and care leavers

ACTION Implement top priority initiatives to address specific and complex health, psychological, housing, educational and employment needs for children in care and care leavers, including implementation of the Rapid Response Framework.

UPDATE With the intent of Rapid Response now legislated, agencies that endorsed the cross-Government framework will continue to work together to better respond to the needs of children in care and care leavers. This will include identifying and responding to issues that impact on timely delivery of services to children in care and care leavers.

A particular area of focus is improving access to mental health and AOD services for these children and young people.

5.22 Better connections between Police and mental health and AOD services

ACTION Investigate options for police officers to request support, consultation, advice and tele-mental health assessment if required to support young people in their custody via a virtual service available state-wide.

UPDATE The 2021-22 Budget included \$21 million over four years to expand the Mental Health Co-Response program in Metropolitan Perth, Geraldton and Bunbury. This means a connected team of Police and Mental Health Practitioners who attend incidents involving mental health crisis for the whole community.

Services working together 5.16 (Top priority action)

Lead Agency Mental Health Commission

Partner Agencies Department of Justice
Health Service Providers
WA Police

Status Completed

Services working together 5.19 (Top priority action)

Lead Agency Health Service Providers

Partner Agencies Department of Health
Mental Health Commission

Status In Progress

Services working together 5.20 (Top priority action)

Lead Agency Department of Communities

Partner Agencies Department of Education
Department of Health
Department of Justice
Department of Local Government,
Sport and Cultural Industries
Department of the Premier
and Cabinet
Department of Training and
Workforce Development
Department of Treasury
Mental Health Commission
WA Police

Status In Progress

Services working together 5.22 (Top priority action)

Lead Agency WA Police

Partner Agencies Health Service Providers
Mental Health Commission

Status In Progress

Additional Mental Health Practitioners will extend the hours of service from 6 to 7 days and two shifts, 0700-1700 and 1400 – 2400 at the Police Operations Centre. Additional Authorised Mental Health Practitioner at the Perth Watch House will increase the service from 6 to 7 days, and two shifts, 0900-1700 and 1700 – 0300.

5.23 Better connections between Police and mental health and AOD services

ACTION Adopt processes and guidelines that provide the ability for police to provide voluntary referral to mental health services.

UPDATE The 2021-22 Budget has supported the recruitment of additional Mental Health Practitioners as outlined in action 5.22.

5.24 Support at-risk young people in the Kimberley, through implementing the Kimberley Juvenile Justice Strategy

ACTION Commence community engagement and co-design process with a view to establish a pilot residential facility where young people have a safe place on-country to address their mental health and behavioural needs while at the same time accessing educational and employment opportunities, as a response to Recommendations 25, 28 and 40 of the Coronial Inquest.¹⁴

UPDATE This action is linked to action 3.22.

Funding for the Kimberley Juvenile Justice Strategy is a continuation of commitments from the 2017 election.

The 2021-22 Budget included \$7.8 million in additional funding to bolster the Kimberley Juvenile Justice Strategy.

As part of the 2021-22 Budget, funding has been allocated for a collaborative project designing an on country residential facility in Broome as an alternative to detention, targeted at young people who are at risk or involved in the justice system.

Services working together 5.23 (Top priority action)

| | |
|-------------------------|--|
| Lead Agency | WA Police |
| Partner Agencies | Department of Health Mental Health Commission |
| Status | In Progress |

Services working together 5.24 (Top priority action)

| | |
|-------------------------|--|
| Lead Agency | Department of Justice |
| Partner Agencies | Department of Communities Department of Education Department of Health Department of Justice Department of Local Government, Sport and Cultural Industries Department of the Premier and Cabinet Department of Training and Workforce Development Department of Treasury Kimberley Development Commission Mental Health Commission WA Police |
| Status | In Progress |

¹⁴ Coroner’s Court of Western Australia, Inquest into the Deaths, of 13 Children and Young Persons in the Kimberley Region (2019).

Future Steps

5.25 Commonwealth and State funding

ACTION To address the issues of fragmented funding, service delivery gaps and lack of service integrations and coordination, the State to engage the Commonwealth Government to work together to identify solutions.

UPDATE The National Cabinet tasked the Health National Cabinet Reform Committee with developing the new National Agreement for Mental Health and Suicide Prevention as their first priority by November 2021. Western Australia is working on the development of the National Agreement with the Commonwealth, States and Territories.

MHC is also working collaboratively with the WA Primary Health Alliance to improve service and care integration and coordination for State and Commonwealth funded services in Western Australia, through Collaborative Action - Continued development of Joint Regional Plans (further information is outlined in action 5.15).

Services Working Together 5.25 (Future action)

| | |
|-------------------------|--|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Health WA Primary Health Alliance |
| Status | In Progress |



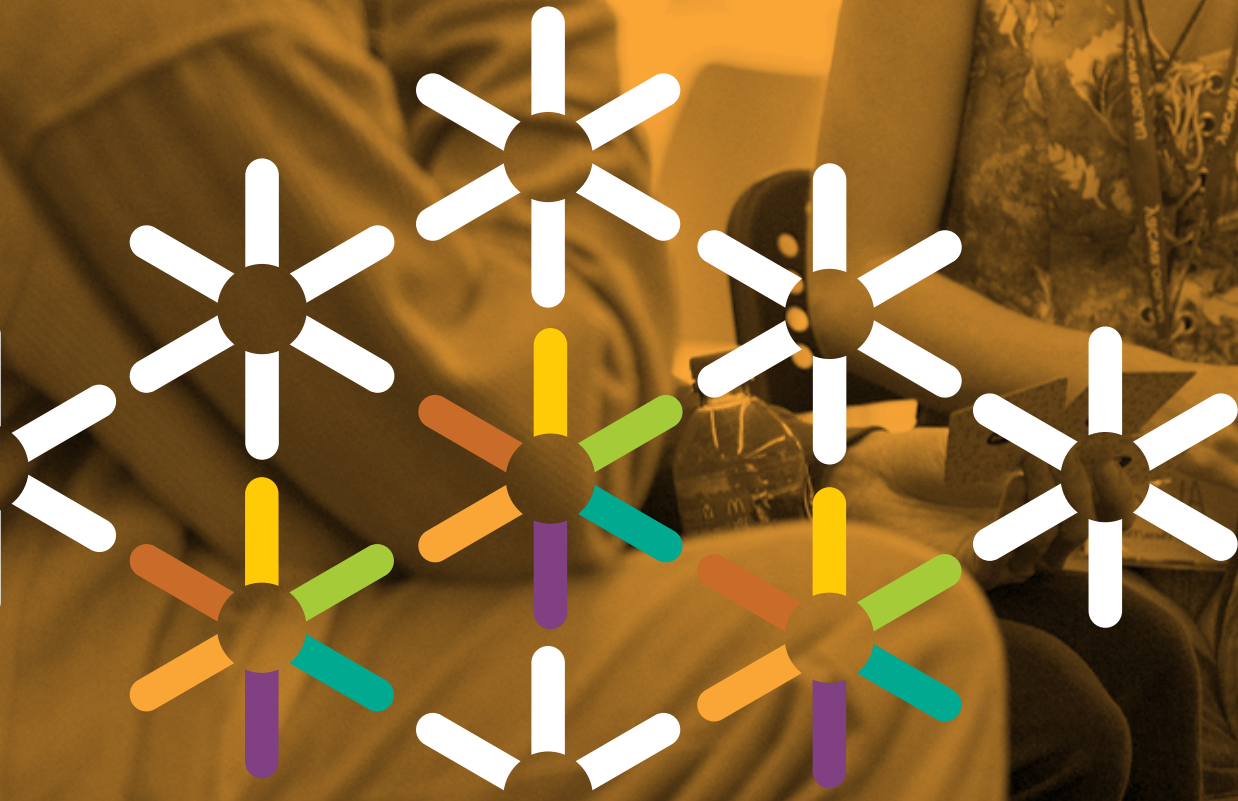
Celeste Berrigan, 17, Armadale Senior High School – RoboMan



Actions

Experiencing positive and trusting relationships and best practice care

Building the capacity, capability and confidence of everyone who works with young people and their families and carers.



Immediate Actions

6.1 Trauma-informed training

ACTION Expand delivery of trauma-informed care and practice training in the mental health community sector and to human services agencies.

UPDATE Seven regional and seven metropolitan workshops on trauma-informed training were delivered to 310 participants by MHC between January and June 2021.

- 93% of participants found the training to be ‘a lot’ to ‘extremely’ useful.
- 83% stated their knowledge of the issue increased ‘a lot’ to ‘extremely’ due to the training.
- 79% indicated they were ‘a lot’ to ‘extremely’ confident in implementing the learnings of the training.
- 77% indicated they felt ‘a lot’ to ‘extremely’ competent in the issue following the training.

6.2 Aboriginal workforce development leads

ACTION Employ Aboriginal workforce development leads to support the mental health and AOD sectors to provide enhanced access and improved outcomes for Aboriginal service users, families and the community, focusing on culturally secure service delivery and growing the Aboriginal workforce.

UPDATE The Western Australian Association for Mental Health and the Western Australian Network of Alcohol and other Drug Agencies are in the process of employing senior Aboriginal staff members to contribute to their sector development activities.

A number of initiatives are being progressed by various Health Service Providers including but not limited to the following:

- Specialist Aboriginal Mental Health Service.
- Aboriginal Mental Health Program.
- Aboriginal Mental Health Coordinators Advisory Group.
- Kimberley Region Certificate 4 in Leadership and Management Course.
- WA Country Health Service Aboriginal Health Strategy.
- Country Health Aboriginal Workforce Committee People Capacity and Culture/Human Resources).
- Aboriginal Mental Health Consultant position.
- Regional Aboriginal Health Consultants Governance and Leadership Group.

Experiencing positive and trusting relationships and best practice care 6.1 (Immediate actions)

Lead Agency Mental Health Commission

Partner Agencies N/A

Status In Progress

Completion Date Ongoing

Experiencing positive and trusting relationships and best practice care 6.2 (Immediate actions)

Lead Agency Mental Health Commission

Partner Agencies Health service Providers

Status In Progress

Completion Date February 2022

The Aboriginal Health Project is developing a pathway to increase Aboriginal workforce participation within the Department of Health. The Department of Health is working towards a target of 3.2% Aboriginal workforce employment.

The Department of Health is also working towards meeting Closing the Gap targets and the Western Australian Aboriginal Health and Wellbeing Framework 2015 – 2030.

6.3 Recovery College

ACTION Promote and encourage the workforce (all people who work with young people in any sector) to attend a Recovery College, where courses will be co-designed and co-delivered by young people, their carers and families.

UPDATE In collaboration with HelpingMinds, Health Service Providers support the implementation of local Recovery Colleges by promoting the Colleges to those with a lived experience and staff.

The Recovery Colleges are promoted by the WA Recovery College Alliance (WARCA) and associated partners, including Recovery College WA; Alcohol and Other Drug Consumer and Community Coalition; Bay of Isles Community Outreach; Consumers of Mental Health WA; Community Options Australia; ConnectGroups; Curtin University; Hope; MIND Australia; Palmerston; Pathways South West; Richmond Wellbeing; Rise; the Salvation Army and Women’s Health and Family Services.

The Recovery Colleges are promoted through websites and social media. Local Action Committees, which will represent local issues and to promote the use of Recovery Colleges locally, are being developed. Additionally the Western Australian Recovery College Alliance Principal regularly liaises with other non-Government organisations, Health Service Providers and various TAFEs, inclusive of promoting courses and securing course venues

6.4 Primary Care

ACTION Promote existing mental health, AOD and youth training available to GPs through the Australian Medical Association and Royal Australian College of General Practitioners.

UPDATE WAPHA promotes existing appropriate mental health, AOD and youth training opportunities and available resources to GPs and other primary care practitioners. This includes training provided by the Royal Australian and New Zealand College of Psychiatrists and the Australian Medical Association.

Training is available for GPs through:

- GP Project – Psychiatry is a preferred option.
- Mental health training through the Royal Australian College of General Practitioners and the Australian College of Rural and Remote Medicine for GPs.
- Medical Workforce Mental Health Action Plan – Currently considering increasing Child and Adolescent Psychiatry and Consultation Liaison training.

Experiencing positive and trusting relationships and best practice care 6.3 (Immediate actions)

| | |
|-------------------------|--|
| Lead Agency | Mental Health Commission |
| Partner Agencies | Department of Health Department of Training and Workforce Development Health Service Providers |
| Status | In Progress |
| Completion Date | June 2023 |

Experiencing positive and trusting relationships and best practice care 6.4 (Immediate actions)

| | |
|-------------------------|----------------------------|
| Lead Agency | WA Primary Health Alliance |
| Partner Agencies | Department of Health |
| Status | In Progress |
| Completion Date | Ongoing |

6.5 Primary Care

ACTION Promote the Youth Friendly Health Service Checklist for health services within the primary care setting.

UPDATE The WA Primary Health Alliance will aim to promote and disseminate the checklist amongst their networks within the primary care setting.

6.6 Diversity in the workforce

ACTION Review recruitment strategies to ensure the attraction and retention of a diverse workforce, including workers from Aboriginal, CaLD, and LGBTQIA+ communities.

UPDATE The Workforce and Employment Unit is the custodian for the Employment Policy Framework that mandates recruitment activities to ensure the attraction and retention of a diverse workforce across the Western Australian health system. This includes:

- The [Recruitment, Selection and Appointment Policy](#) (updated April 2020);
- The [Aboriginal Workforce Policy](#) (updated July 2021);
- The [Equal Opportunity Discrimination and Harassment Policy](#) (2019); and
- [Western Australian Multicultural Policy Framework](#) (February 2020).

The Department of Health is currently undertaking an audit of the Employment Policy Framework, which may result in these policies being updated and amended to further enhance requirements to promote workforce diversity.

Additionally, the Aboriginal Workforce Policy specifies the mandatory policy requirements that Health Service Providers must comply with to attract, recruit and retain Aboriginal people and increase the number of Aboriginal employees at all levels in the health system. Examples include application of section 51 and 50D of the *Equal Opportunity Act 1984* and cadetship and graduate programs.

Health Service Providers undertake a range of activities to promote diversity in the workforce.

As part of the implementation of the Western Australian Multicultural Policy Framework for the public sector, the Department of Local Government, Sport and Cultural Industries and the MHC have been collaborating regarding recruitment of mental health and AOD workers from CaLD backgrounds for inclusion into MHC's Multicultural Action Plan.

Experiencing positive and trusting relationships and best practice care 6.5 (Immediate actions)

| | |
|------------------|----------------------------|
| Lead Agency | WA Primary Health Alliance |
| Partner Agencies | N/A |
| Status | In Progress |
| Completion Date | Ongoing |

Experiencing positive and trusting relationships and best practice care 6.6 (Immediate actions)

| | |
|------------------|---|
| Lead Agency | Department of Health |
| Partner Agencies | Department of Communities Department of Justice Department of Local Government, Sport and Cultural Industries Mental Health Commission |
| Status | In Progress |
| Completion Date | Ongoing |

Top Priorities

6.7 Specific training regarding supporting children and young people

ACTION Develop and provide relevant training in supporting and treating children and young people with mental health and AOD issues (school nurses, GPs, Mental Health Co Response, emergency department staff etc).

UPDATES 6.7a Relevant training and education for the Mental Health co-Response service is covered within existing MHC funding.

The Office of the Chief Medical Officer is working on a Medical Workforce Mental Health Action Plan. Stakeholder engagement and consultation are currently underway.

6.7b The WA Country Health Service reports that the Midwest Community Alcohol and Drug Service, in partnership with Ngala and the School Drug Education Road Aware program, have developed a training workshop for parents and carers of young people on reducing risk factors for AOD issues in young people.

The WA Country Health Service Aboriginal Mental Health program provides localised Cultural Awareness Training and competence in working with Aboriginal People in the regions.

There is a mandatory updated E-Learning Cultural Awareness training for all staff.

6.9 Cultural training

ACTION The youth mental health and AOD sector review their cultural training, both content and process, in consultation with Elders and Aboriginal young people to improve the confidence and capability of all staff to work in genuine partnership with Aboriginal people.

UPDATE The Child and Adolescent Mental Health Service Aboriginal Cultural Security Review tool was developed in collaboration with Aboriginal community members, including young people and Elders.

Experiencing positive and trusting relationships and best practice care 6.7a (Top priority action)

Lead Agency Department of Health

Partner Agencies Mental Health Commission

Status In Progress

Experiencing positive and trusting relationships and best practice care 6.7b (Top priority action)

Lead Agency Department of Health

Partner Agencies Mental Health Commission

Status In Progress

Experiencing positive and trusting relationships and best practice care 6.9 (Top priority action)

Lead Agency Health Service Providers

Partner Agencies Department of Health

Status In Progress



Rickiesha Deegan (she/her), 24 @kieshdesigns

4. Governance and Reporting

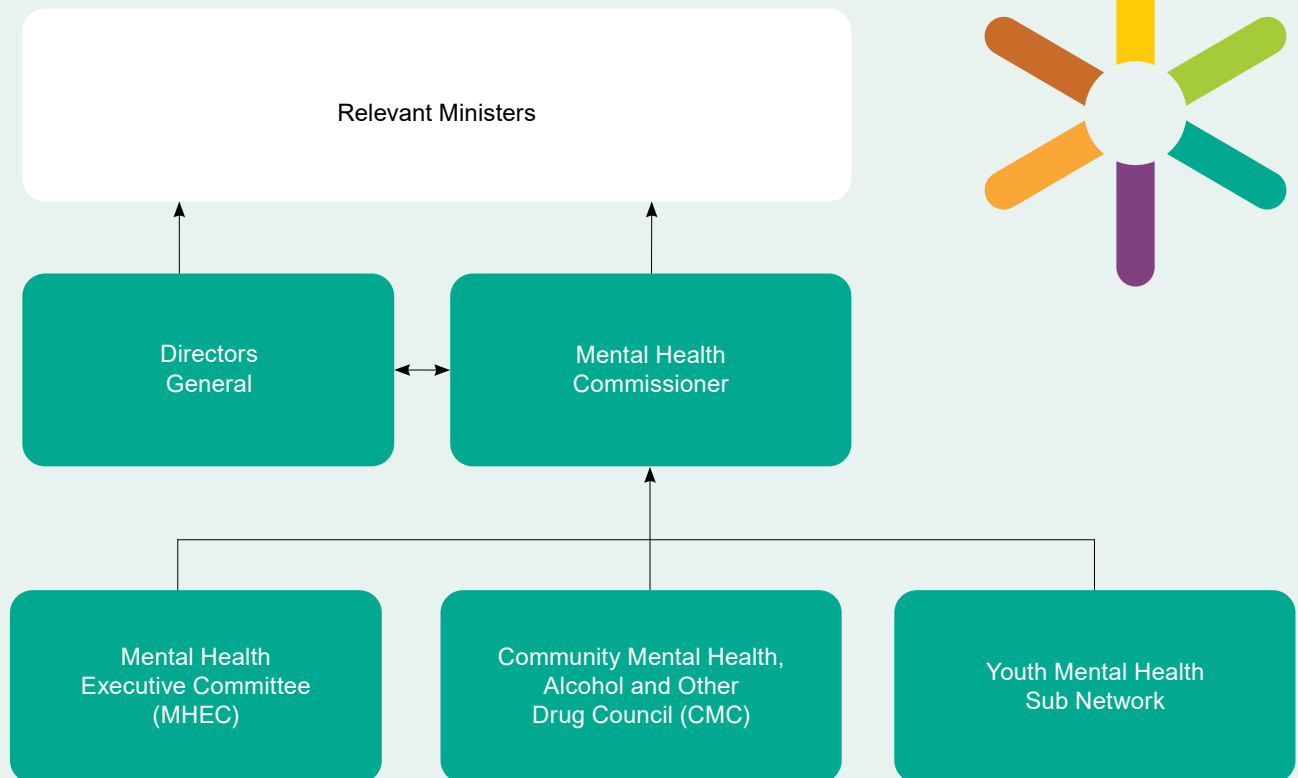
Governance structure

Governance arrangements will include representatives from the following State Government agencies:

- Department of Communities;
- Department of Education;
- Department of Health;
- Department of Justice;
- Department of Local Government, Sport and Cultural Industries;
- Department of the Premier and Cabinet;
- Department of Training and Workforce Development;
- Department of Treasury;
- Mental Health Commission; and
- Western Australia Police Force.

The agencies will meet formally on a six-monthly basis during the implementation of the YPPA to:

- Identify agency progress;
- Identify opportunities for Government and non-Government stakeholders to work more effectively across the mental health and AOD service system to promote improved coordination, integration, and other efficiencies; and
- Highlight the current areas of work that we need to continue and identify areas to strengthen and grow.



Yearly Reporting

The MHC will coordinate the development and public release of a yearly report which will provide an update on the progress of implementing the YPPA. Government agencies will be responsible for all other ongoing monitoring and reporting functions for the actions which they lead.

The reporting schedule is outlined in the diagram below. The yearly reports will be produced for each financial year. Program level outputs and short-term program level outcomes will be reported where possible.

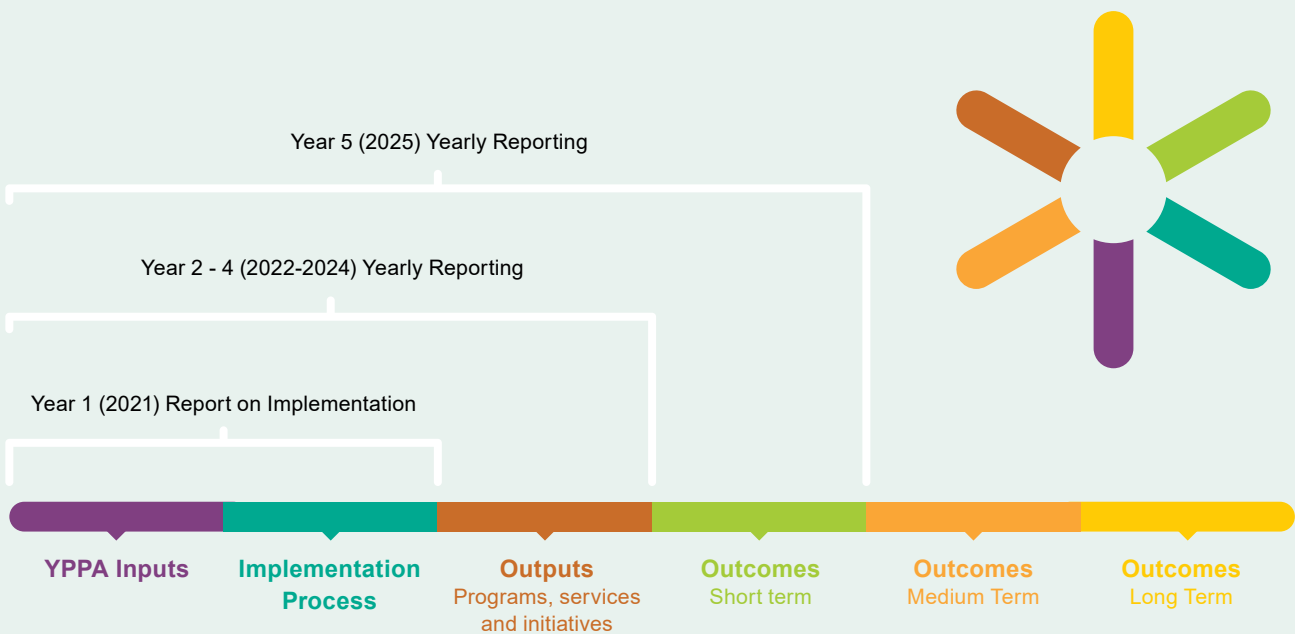
Outcomes Measurement Framework

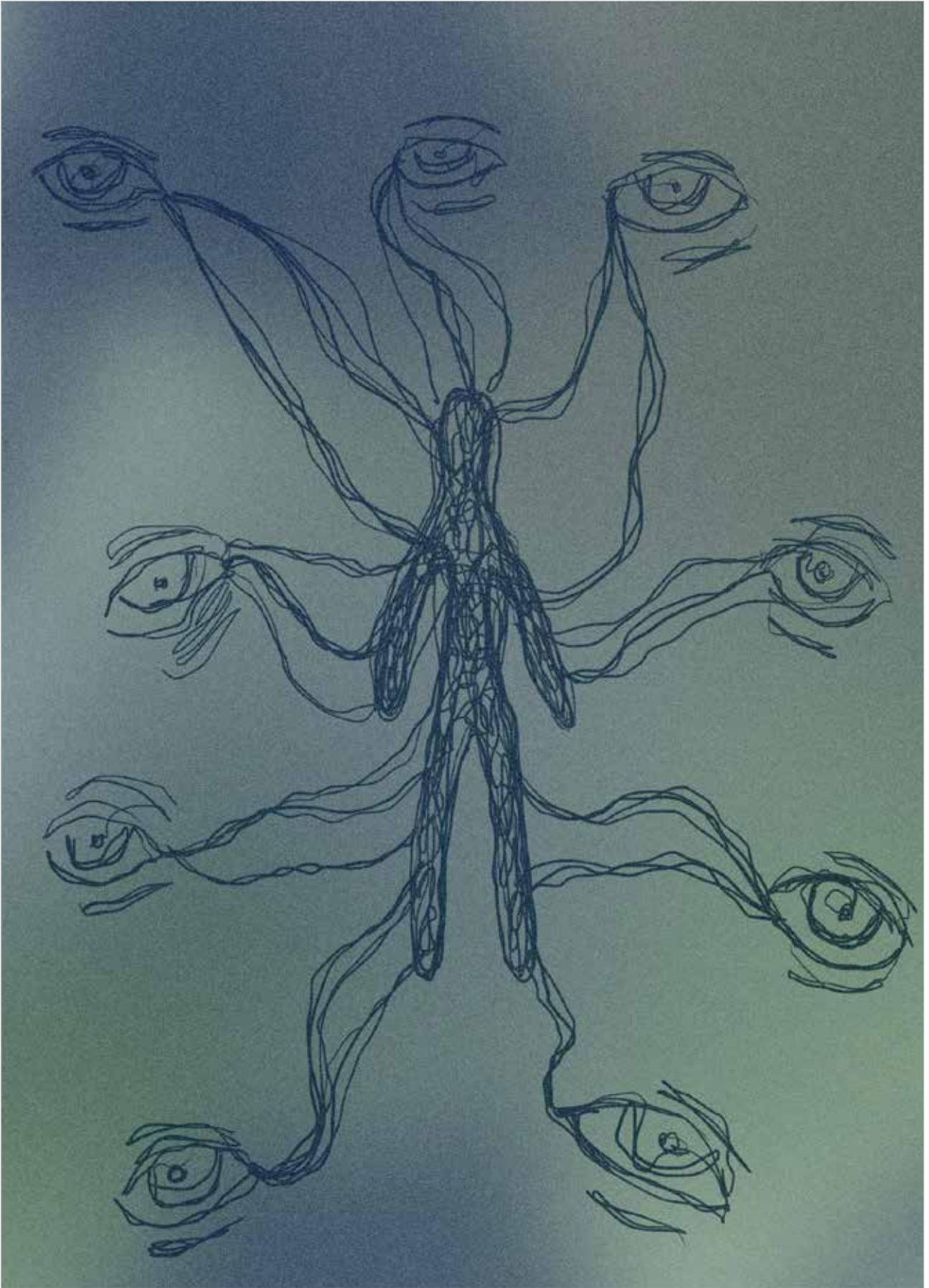
The System Wide Data Working Group was established in 2021 to support the Mental Health Executive Committee (MHEC) and the Community Mental Health Alcohol and Other Drug Council (CMC) by undertaking time-limited data related projects. These projects will provide advice in relation to the ongoing monitoring, reporting and evaluation of the mental health and AOD sector.

The first priority project of the System Wide Data Working Group is to develop an Outcomes Measurement Framework for the Western Australian State Priorities Mental Health, Alcohol and Other Drugs 2020 – 2024 (WA State Priorities) that will support evidence based decision making and public reporting on progress with achieving anticipated outcomes.

Several projects within the YPPA will be included in the ongoing development of the Outcomes Measurement Framework.

The Mental Health Commission will engage with young people to ensure that outcomes are developed that are meaningful to them. This will include young people with a living or lived experience of mental health, alcohol and other drug issues.





Rickiesha Deegan (she/her), 24 @kieshdesigns



Emma McGhee, 17, Armadale Senior High School

Other References

1. Australian Institute of Health and Welfare (2021) [*Australia's youth*](#) Australian Institute of Health and Welfare, Australian Government, accessed 19 November 2021
2. Commissioner for Children and Young People WA (2021) [*Exploring the decline in wellbeing for Australian girls*](#) Commissioner for Children and Young People WA
3. Commissioner for Children and Young People WA (2021) [*Participation Guidelines: Ensuring children and young people's voices are heard*](#) Commissioner for Children and Young People WA
4. Commissioner for Children and Young People WA (2021) [*Speaking Out Survey 2021. The views of WA children and young people on their wellbeing – a summary report*](#) Commissioner for Children and Young People WA
5. LGBTIQ+ Health Australia (2021) [*Beyond Urgent: National LGBTIQ+ Mental Health and Suicide Prevention Strategy 2021-2026*](#) LGBTIQ+ Health Australia, accessed 19 November 2021
6. MHC (Mental Health Commission) (2021) [*Commitment to Aboriginal Youth Wellbeing Progress Report: A response to the State Coroner's Inquest into the deaths of 13 children and young persons in the Kimberley, and Learnings from the Message Stick: the Report of the Inquiry into Aboriginal Youth Suicide in Remote Areas*](#) MHC, Government of Western Australia
7. MHC (Mental Health Commission) (2020) [*Young People's Mental Health and Alcohol and Other Drug Use: Priorities for Action 2020-2025 Supporting Paper*](#) MHC, Government of Western Australia
8. Ministerial Taskforce into Public Mental Health Services for Infants, Children and Adolescents aged 0-18 in Western Australia (2021) [*Emerging Directions: The Crucial Issues for Change*](#) Ministerial Taskforce into Public Mental Health Services for Infants, Children and Adolescents aged 0-18 in Western Australia, Government of Western Australia
9. Nous Group (2021) [*Western Australia Youth Mental Health, Alcohol and Other Drug Homelessness Service: Consultation Report*](#) MHC (Mental Health Commission), Government of Western Australia
10. Wright M, Brown A, Dudgeon P, et al (2021) 'Our journey, our story: a study protocol for the evaluation of a co-design framework to improve services for Aboriginal youth mental health and well-being' [*BMJ Open 2021;11:e042981*](#). doi: [*10.1136/bmjopen-2020-042981*](#)



Hayley Ferguson, 15, (she/her) Bunbury Senior High School



Cover artwork

Animal Congregation by Xavier Cubillo, 20

Inspired by the multiple stories of the Rainbow Serpent. For this artwork the main inspiration was that the rainbow serpent was a benevolent Creator-God.

Other inspiration for this artwork were other dreamtime stories such as Gooriala the Rainbow Serpent and the bat and the crocodile, where animals – herbivorous and carnivorous, coexisted together and communicating and working together. This is why there are multiple different animals in this picture, gathering together for a campfire with the Rainbow Serpent, each animal representing a different animal group; for example, The Rainbow Serpent represents reptiles, the emu and black cockatoo representing the birds, a frog to represent amphibians, a koala to represent the mammals and the flies to represent the insects. When I was colouring the Rainbow Serpent I thought to myself “What would the Rainbow Serpent look like?” When I asked myself this question, I started to think about the Australian land we live on; the sands, the trees, the sun, the sky. This was when I came up with the idea of the rainbow serpent having colours that represented elements of nature. To top off the rainbow serpent’s look, I thought it should have something to separate itself from other snakes, so I gave it a crown-like head dress.



Back cover artwork

Baiaime, Giver of Life by Xavier Cubillo, 20

This piece of hand drawn art was inspired by dreamtime story told by the Wonnarua people in New South Wales.

The story is about a god named Baiaime, who came down from the sky to teach the Aboriginal tribes about culture.

I re-interpreted Baiaime, as the title suggested, a giver of life. The image depicts Baiaime (the giant in the background). Giving life to a barren Australia, growing grass and creating animals. While I was first sketching the draft of this artwork, I came up with the idea of Baiaime’s clothes resembling the feathers of emus to justify the title of “Emu God”.



Government of **Western Australia**
Mental Health Commission

GPO Box X2299,
Perth Business Centre
WA 6847

Level 1, 1 Nash Street,
Perth, WA 6000

T (08) 6553 0600

mhc.wa.gov.au

