

DEPUTY PREMIER'S SPEECH – COMMUNITY MENTAL HEALTH, ALCOHOL AND OTHER DRUG COUNCIL – MEETING 1¹

- Good morning everyone and welcome to the first Community Mental Health, Alcohol and Other Drug Council (CMC) meeting.
- I am very excited to be here this afternoon to launch the inaugural meeting of this Council.
- Back in March I announced several new governance arrangements for the mental health, alcohol and other drug services in Western Australia, including the establishment of the Mental Health Executive Committee. And in June, I announced the establishment of the CMC.
- I also announced the establishment of a new role at the MHC, the Chief Medical Officer, Mental Health, which as you know, Dr Sophie Davison has been appointed to undertake this position.
- Sophie's role is critical in strengthening the Commission's leadership role as it will provide clinical expertise, contribute to strategic planning and policy development, strengthen consumer and community focused clinical care, and liaise with non-government services to support system integration.
- Sophie will be critical in the connection between clinical and community organisations.
- Sophie is also the Deputy Chair to the MHEC and Community Mental Health, Alcohol and Other Drug Council and the Chair of the Mental Health Leads Sub-Committee.
- Bringing you all together through this Council, to drive and work collaboratively to lead the implementation of our collective intentions and objectives for mental health, alcohol and other drug services is so important.
- Each of us around the table has a part to play in strengthening integration of services, developing the sector and ensuring we are all accountable.
- In the past year, we have made good strides in developing the sector.
- The Government has committed millions of dollars and undertaken much work to establish step up/step down services around Western Australia; our first Statewide Recovery College and more alcohol and other drug treatment services.
- Coming down the pipeline, we have also recently announced a new \$25 million adult community care unit; a new \$25 million youth homelessness service; and major expansions of suicide prevention services - those will come on line from January next year.
- But we all know there is so much work to do.
- There is nearly a billion dollars that goes into the mental health, alcohol and other drug sector and we need to use that funding better, while also advocating strongly and collaboratively within the community.
- We need to keep a firm eye on the longer-term vision and continue to work towards that.
- So what is that longer term vision?
- **Our vision** – our collective vision – from the many organisations and individuals that contributed – is the State's 10-year plan for mental health, alcohol and other drug services.
- The Plan remains contemporary and continues to be the vehicle for guiding our work in mental health, alcohol and other drugs.
- It sets out our vision for a Western Australian system that enables reduced mental health problems, suicide and suicide attempts, and minimal alcohol and other drug harms.
- You would all know that it highlights that we want a balanced system, with adequate community services to keep people out of hospitals.
- We want to provide recovery-oriented care, tailored to the individual.

¹ This is an abridged version of the speech given by the Deputy Premier Roger Cook at the CMC meeting on 24 August

- We want to give people the care they need: This includes in Emergency Departments or hospitals if they need it, but more often than not in the community care settings that your members and organisations provide, with those wrap-around, holistic supports.
- I would like to briefly touch on the issue of **system balance**.
- It's no secret that our government has invested significantly in hospitals and acute care.
- We have recently announced an expansion to Fremantle Hospital and there are more improvements underway in Joondalup, Bunbury, Geraldton and others.
- The need for these investments is consistent with the Plan requirement to increase specialist services in parallel with community services investment. The Government is keen to invest in a strong mental health and AOD system that provides increased capacity and capability to look after and support all of our community's mental health and AOD needs
- As such, this does not change my commitment to delivering more and better services in the community, and it does not change our commitment to the goals outlined in the 10-year Plan.
- My question to you is, how can we collaborate together, to drive support for the goals of prevention and community services?
- How can we ensure the community is the beneficiary of the investment they make via their taxes?
- As an example, how might we best utilise investment in local NGO counselling services in a suburb to ensure accessible and responsive support services?
- Can we collaborate to provide greater visibility to the consumers who benefit from peer support and other community services?
- And ideally, I'd like Jen and the Commission to work with you, so that at a Government level we can collate the data and information we need, to understand what is happening across the sector, and have the ability to show the wider Government and the community, the fantastic work that is being done.
- Of course, we need to also work on improving what we already have.
- We are currently reviewing our non-admitted services in the public sector, to ensure that services delivered in community settings by public agencies, are more consumer focused, connected to community-based providers and deliver better outcomes.
- There have been several similar reviews across community support service types in the past year, to ensure we can improve commissioning and service delivery in those areas.
- The 10-year Plan also describes the importance of **prevention** services and sets a target of 5% of funding to that space.
- That is also something we need to strategically work towards and advocate for.
- In the meantime, the work that Healthway continues to do; the Commission through Think Mental Health, Alcohol Think Again and Drug Aware; and the many non-government organisations in prevention and promotion, continues to be vital.
- Also critical to mental health and AOD prevention, is the government's other supports and activities that help keep our society together. We have invested significantly in recent months in housing services; jobs and business supports; and recreation, culture and other community groups.
- Our Government is doing significant work in those areas across various Departments as part of a holistic approach, to support Western Australians.
- Ultimately, our goal via the 10-year Plan, is to enable everyone to work together, to encourage and support people to live a satisfying, hopeful and contributing life.
- There is a lot of work to do and I'm asking you, the people in this room, to help the Commission lead this work, collaboratively with each other and others in the sector.
- You play a key role in bringing the sector together and working towards the Government's strategic priorities.

- Earlier this year I released a set of **Priorities** for mental health, alcohol and other drugs in WA. These provide focus to the large number of actions in the Plan and clarity around the immediate steps and issues to focus on, to have the maximum positive impact on the system.
- These Priorities are informed by the Plan, as well as other government reports, and strategies and frameworks developed by the Mental Health Commission, in consultation with yourselves.
- We need to be innovative and provide practical solutions to issues; and proactive leadership in delivering the changes that are needed.
- I have been advocating for the non-government sector within Government, along with my colleague Alanna Clohesy and will continue to do so.
- We are absolutely committed to supporting the community services, and working with you and the public agencies to better integrate the sector and make it easier for consumers to navigate.
- The CMC and the MHEC are critical vehicles to lead this reform and the continuous development of the system.
- We also need consumers and carers to be central to the development and delivery of that work.
- This is why Amanda and Kerry are here as members of the CMC and the MHEC and will play a critical and valuable role in advising us and driving this reform.
- I have met and heard from so many extraordinary people throughout Western Australia who are looking for help from our services.
- There are so many more that we will never hear from, as people continue to go about managing their mental health and alcohol and other drug use, and finding solutions in the best way they can.
- We must keep all these people front of mind, as we work through the significant and transformational change required for this sector.
- It will take time, but we need to get it done. There are many Western Australians whose health and lives depend on it.
- I know that history will judge us kindly if we step up and work together, and have courage in delivering real, tangible improvements to the mental health and AOD sector in WA.
- To achieve the reform and integration the system needs, the CMC will need to work together in partnership with the MHEC. I also made clear to the MHEC on Wednesday my expectations of this cross-collaboration as I can't understate how important it is to get this integration piece right between the public health system and the community sector.
- Thank you, to each of you, for your ongoing hard work, leadership and dedication.
- By combining our collective efforts, we can truly deliver the best possible support and outcomes for those who need mental health and AOD treatment and support.