CTER Roadmap Project
Roadmap for community mental health treatment services, including emergency response services.

PROJECT TERMS OF REFERENCE

Document Control

Document Title	**CTER Roadmap Project Terms of Reference**		
TRIM File Name	CTER Roadmap Project Terms of Reference		
TRIM File No.	MHC-13823/001	TRIM Doc No.	MHC21/2408
Status			
Owner			
Version No.	2.0	Version Date	02/03/2021

Release and approval

Reviewed by	Signature	Date
Mental Health Leads Sub-Committee (MHLS)	Out of Session approval	December 2020
Roadmap Steering Committee	Endorsed at meeting on 29 June 2021	29 June 2021

Record of issue

Version	Date	Reason and comment
1.0	October 2020	Draft (MHLS meeting)
1.1	November 2020	Revised draft (MHLS meeting)
1.2	December 2020	Revised draft (MHLS meeting, CMC, MHEC)
1.3	December 2020	Revised draft (MHLS out of session)
2.0	March 2021	Final draft

Contact for enquiries and proposed changes

All queries and changes regarding this document should be directed to	
Name	Anya-Jane Walters
Position	Principal Project Manager

Roadmap for community mental health treatment services, including emergency response services (CTER Roadmap)

1. Rationale

The WA Mental Health, Alcohol and Other Drug Services Plan 2015-2025 (Plan) identified the optimum mix and level of services to be provided across five service streams, including community-based options. The updated modelling in 2018 reported a shortfall in supply of community-based services and, in the absence of suitable alternatives, hospital services were experiencing high demand. The Auditor General's Access to State-Managed Adult Mental Health Services Report (Auditor General's Report) highlighted the need for further investment in community treatment and support services. The Auditor General's Report also demonstrated a community treatment system under stress.

The Sustainable Health Review Strategy 2 recommended implementing models of care for people to access responsive and connected mental health, alcohol and other drug (AOD) services in the most appropriate setting. In particular, it recommended introduction and evaluation of early intervention, assessment and treatment outreach models to provide immediate assistance to people experiencing a mental health crisis in the community and expansion of community models of care.

Over recent years the demand for inpatient beds has remained very high, with the system escalated to the status of black on many occasions meaning people with mental health issues are spending very long periods in emergency departments. This has become particularly severe during the second half of 2020. There have also been difficulties in discharging consumers from hospital beds because of the lack of appropriate treatment and support in the community.

In addition, consumers, carers and community support providers continue to identify the need for accessible person centred and responsive community mental health treatment services that are well coordinated with other treatment and support services to support consumers' and their families and carers in their recovery.

The Western Australian Chief Psychiatrist's Targeted Review Report into homicides in 2019 stated *"there is a pressing need for a public mental health services plan to operationalise the MHAOSP (the Plan) which articulates a vision for service development and transformation, that addressed the critical gaps in services and provides guidance on models of care, services standards and resourcing".*

The Mental Health Commission (MHC) has completed several projects of relevance in this area:

- Evaluation of Mental Health Emergency Response Line (MHERL)
- Evaluation of non-admitted services
- Development of a pilot one stop shop, and
- Development of an AOD crisis intervention model.

The outcomes of each of these four projects are being progressed individually. However, the implementation of each these projects needs to be complemented by and feed into the development of an overall strategic framework which ensures that all projects collectively contribute to the development of a coherent and integrated system for providing care in the community and responding to emergencies with a service mix in line with the Plan.

2. Purpose

In Western Australia public community mental health treatment services (community treatment services) are intended to provide coordinated care in non-admitted settings for individuals with severe and persistent mental health conditions. Community treatment services generally operate as multidisciplinary teams who provide outreach, transition support, relapse prevention planning, physical health assessment and support for good general health and wellbeing. Community treatment services can be intensive, acute or ongoing. All community treatment services include carers in relevant treatment decisions, are family inclusive, trauma informed and recovery-oriented.

For the purpose of this project, Emergency Response Services are defined as treatment and support services provided by HSPs for individuals experiencing a mental health crisis. Emergency mental health services currently include emergency department services, crisis telephone support lines such as the Mental Health Emergency Response Line (MHERL), community mental health teams and emergency telehealth services.

A mental health crisis situation includes when an individual:

- feels they require urgent assistance;
- is experiencing an 'acute' episode due to substance abuse, extreme anxiety, depression or psychosis;
- has had a suicide attempt; and/or
- has become violent or is experiencing rapid changes in behaviour.

This project will develop a system-wide Roadmap and implementation plan that provides a clear vision for community treatment services and mental health emergency response services. The Roadmap will provide the framework for reforming these services so that they are responsive, accessible, person-centred and seamlessly connected.

The Roadmap will outline the models of service (MoS) and care pathways that will best meet the needs of people in Western Australia of all ages who require public community mental health care and/or emergency mental health care. For the purpose of this project, MoS (also referred to as models of care) details the purpose, target population, functions, stages of treatment or episode, operation and governance involved in the delivery of high quality, best practice and safe mental health services.

The Roadmap will identify short, medium and long term priorities for action, and a costed implementation plan aimed at maximising the cost-benefit of community treatment services purchased by the Mental Health Commission (MHC).

In the first instance the project will investigate and recommend how current services could be **optimised, reconfigured, enhanced, or expanded** as well as identifying where **new services** may be required. This includes consideration of 7-day-a-week service profiles and a shift to focusing on inclusion rather than exclusion criteria.

In scope

- Public community mental health treatment services.
- Mental health emergency response services, including telehealth and helplines.
- The interface between primary care and public community mental health treatment services.
- The interface between alcohol and other drug treatment services and public community mental health treatment services.
- The interface between community mental health support services and public community mental health treatment services.

Out of scope

- Primary care services, except at the interface with community mental health treatment and emergency response services
- Community mental health support services, except at the interface with community mental health treatment services and where MoS involve working in partnership.
- AOD treatment services except at the interface with community mental health treatment and emergency response services.

The Roadmap will consider the following questions:

- What principles should inform the development of contemporary community mental health services?
- What supports and resources do consumers and their families and carers need to live a good life in the community?
- What MoS would best provide evidence-based, integrated, contemporary, culturally secure and person-centred care in the community?
- What MoS would ensure that people's specific and diverse needs are met, including but not limited to gender diverse people, people with eating disorders and people with a personality disorder?
- What MoS will provide evidence-based, contemporary, person-centred emergency care in the community for people in crisis and reduce the demand on emergency departments and inpatient beds?
- What MoS are needed to provide care for people with co-occurring needs and severe and complex mental illness requiring person-centred multiagency care planning and care coordination?
- What MoS are needed to meet the projected needs for mental health services and to meet the needs of local communities?
- What are the systemic barriers to change?
- What are the key commissioning, governance and working arrangements that are required to support service integration, coordination, and responsiveness?
- What linkages with primary health, community support services and other government agencies are required to strengthen the mental health capacity and support options across the system?
- What workforce skill mix, scope of practice and recruitment strategies are needed?
- How might the above be achieved by optimising, reconfiguring or enhancing existing services and what resources may be needed to implement these MoS and services?
- What new commissioning and funding opportunities do we need to prioritise to support the Roadmap?
- How will effectiveness and success of the MoS be measured, monitored and reported from the perspective of consumers, carers, clinicians and other stakeholders?

The key deliverable from the project will be an agreed Roadmap for the further development of mental health community treatment and emergency response services. Once endorsed by Mental Health Executive Committee (MHEC) and the Community Mental Health, Alcohol and Other Drug Council (CMC) and agreed by Government, this Roadmap will be used by the MHC, MHEC, CMC and Mental Health Leads Sub-Committee (MHLS) to oversee the development of existing and new services.

There will be opportunities for further deliverables to be realised during the course of the 12 month project.

3. Method

The project activities will include:

- Extensive lived experience, clinician and stakeholder consultation
- Mapping consumer pathways
- Modelling projected demand and need
- Evidence of best practice from elsewhere
- Literature review on the best practice models of care in the community, and
- Identification of gaps in community treatment, support and emergency response services.

4. Governance

An executive Project Sponsor and project team inclusive of a Principal Project Manager and Project Officer will be established within the MHC.
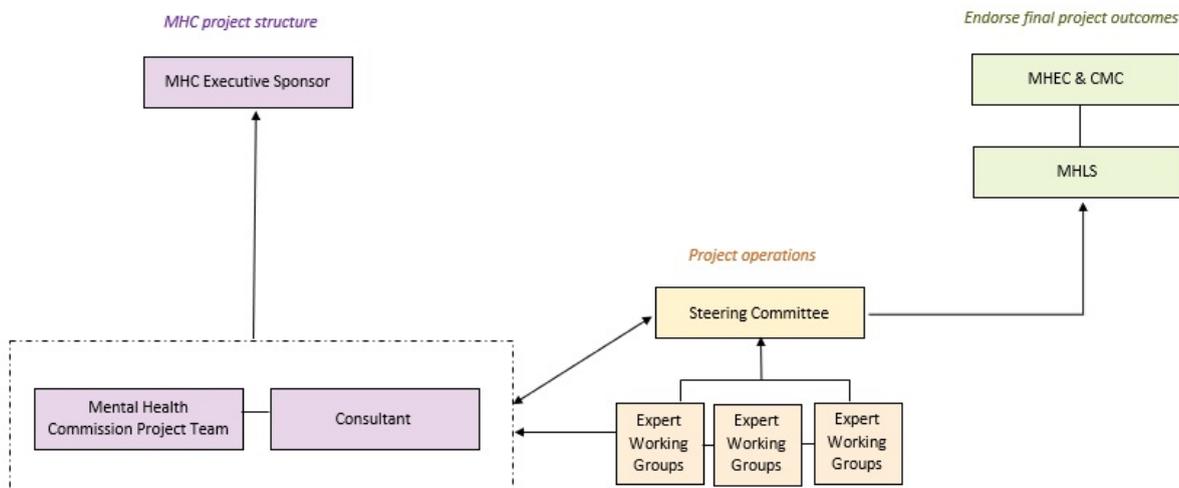
A project Steering Committee will provide strategic oversight; monitor project performance; assist in identifying and managing issues and risks; and guide the development of the Roadmap to ensure it is robust and implementable.

Expert Working Groups reporting to the Project Team and Steering Committee will be established to facilitate comprehensive stakeholder consultation and to provide specialist system knowledge, insight and critical comment.

Lived experience representatives will be sought for both the Steering Committee and Expert Working Groups.

To enable broader consultation with the whole of government, the Steering Committee will utilise existing mechanisms such as the Directors General Implementation Group or Public Sector Leadership Council.

See Terms of Reference for the Steering Group and Expert Working Groups (Related Documents)

5. Interdependencies

The Steering Committee will liaise regularly and closely with the Ministerial Taskforce into Public Mental Health Services for Infants, Children and Adolescents Aged 0-18 Years in Western Australia, as the findings of that Taskforce inform the recommendations of the Roadmap in relation to children's community mental health treatment and emergency response services.

The project will be informed by the following key documents and projects:
- The recently completed Non-admitted Mental Health Services and MHERL evaluations
- The outcomes of implementation of a pilot OSS service model
- Development and implementation of an AOD crisis intervention model and the Walk With Me project
- The Western Australian Auditor General's Report – Access to State-Managed Adult Mental Health Services and analysis of the linked data generated for the report.
- Mental Health, Alcohol and Other Drugs Services Plan 2015-2025 and Plan Update 2018.
- Outcomes of the newly proposed Active Recovery Teams.

Additional background documents that may inform the project:
- WA State Priorities Mental Health, Alcohol and Other Drugs 2020-2024.
- Fifth National Mental Health and Suicide Prevention Plan.
- Productivity Commission Inquiry into Mental Health and the National Mental Health and Wellbeing Pandemic Response Plan.
- Sustainable Health Review.
- The Western Australian Auditor General's Report – Access to State-Managed Adult Mental Health Services and analysis of the linked data generated for the report.
- One Stop Shop service model development.
- Survey of High Impact Psychosis.
- Young People Priorities for Action.
- Personality Disorders Model of Care Final Report.
- Royal Commission into Aged Care Quality and Safety.
- Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability.
- Chief Psychiatrist review into the treatment of Ms Kate Savage by Child and Adolescent Mental Health Services.
- Working Together: Mental Health and Alcohol and Other Drug Engagement Framework 2018-2025, and the Stakeholder Engagement Framework
- Increasing and Improving Community Mental Health Support in WA (WA Association for Mental Health report).
- Evaluation of the closure, assessment and relocation of Franciscan House residents.
- Community Mental Health Step Up Step Down data/evaluation.
- Western Australian Methamphetamine Action Plan.

- Western Australian Mental Health, Alcohol and Other Drug Workforce Strategic Framework 2020-2025.
- National Agreement on Closing the Gap.
- Report of the Forensic Youth Mental Health Mapping of Pathways: Access to Care Working Group.
- MHC Multicultural Plan 2021.
- The implementation of A Safe Place Strategy.
- 360 Edge Report - Exploring the place of alcohol and other drug services in a successful mental health system.

6. Related Documents

- CTER Roadmap Project Plan
- CTER Roadmap Steering Committee Terms of Reference
- CTER Roadmap Expert Working Groups Terms of Reference