



## MENTAL HEALTH EXECUTIVE COMMITTEE COMMUNIQUE - MEETING 23 November 2021

The sixth meeting of the Mental Health Executive Committee (MHEC) was held on 23 November 2021. This communique provides all stakeholders with information and outcomes from this meeting.

The key priority projects of the MHEC and CMC continue to be the [Community Treatment and Emergency Response Roadmap](#), Ministerial Taskforce into Public Mental Health Services for Infants, Children and Adolescents, [Graylands Reconfiguration and Forensic Taskforce](#) (GRAFT) and the Long Stay Patient Project. Addressing the mental health and alcohol and other drug (AOD) workforce shortages and building a skilled and sustainable workforce through a suitable workforce plan and appropriate strategies are also a key priority.

In summary, the discussions at MHEC have centred around the emerging findings of key projects and the intersection with reviews of existing services, such as the recently completed Hospital in the Home (HiTH) Evaluation. Across projects, the focus is on how to ensure practical implementation for sustained change through system-wide transformation and through improvements to how existing services are funded, delivered and experienced. Ensuring the voice and role of people with lived-experience across projects and growing the workforce is a priority in across the mental health sector.

### Community Treatment and Emergency Response Roadmap Project

The discussion paper is being finalised for the [Roadmap Project](#), and is anticipated to be released in February 2022. The discussion paper will inform broader community consultation on the transformation of publicly funded mental health services. Recommendations will cover improved experiences for consumers and carers, changes to workforce, services, technology and governance. Consultations have highlighted the need to put people and their families first, to have culturally safe and inclusive approaches and for support to be available for families and carers. Findings indicate that demand has outgrown population growth resulting in Emergency Departments being the default access point for specialist mental health care. The Roadmap communique is available on the [MHC website](#).

The Hospital in the Home (HiTH) evaluation findings were also presented to MHEC and a report will be available in early 2022. The work of the HiTH will inform the Roadmap project. Overall, the HiTH program is well-received however, areas for improvement include the need to expand HiTH availability in metropolitan, rural and remote communities and to ensure the model is better connected to health and psychosocial support services in the community.

### Ministerial Taskforce into Public Mental Health Services for Infants

The Ministerial Taskforce into Public Mental Health Services for Infants (ICA Taskforce) delivered the final report to Government on 30 November 2021. This very significant report will now be considered by Government. The report will recommend how public infant, child and adolescent mental health services in WA should be configured to meet the demands of this cohort and their families, to ultimately achieve better and more equitable outcomes.

### The Graylands Reconfiguration and Forensic Taskforce (GRAFT)

GRAFT informs the Government's planning and investment decisions regarding the Graylands hospital site, forensic mental health services and the nearby Selby Older Adult Mental Health Service. Government announced that a portion of the Graylands site will be retained for mental health services. Forensic services will remain on the Graylands site and be expanded and modernised, and there will also be the development of contemporary rehabilitation and recovery services. This will take some time to be implemented but care provided at the Graylands site will be contemporary,

### The Long Stay Steering Committee and Working Group

The Long Stay Project, led the Department of Health (DoH), has brought the Mental Health Commission (MHC), DoH and the Department of Communities together to find solutions for people who are medically fit to transition from hospital to the community but do not have community support or housing available. The ongoing number of long stay patients has now reduced to 100 people, from approximately 130 people. It is estimated that 180/190 people have been transitioned to community supports through the

project. A 12-bed hospital-to-home transition residential program provided by Hall and Prior and a dedicated social worker based in each health service are part of system-wide initiatives.

### **Mental Health Workforce Planning**

The current shortage across the public health and community sectors is a top priority and a critical issue across the committees. The Mental Health Commission (MHC) and DoH are partnering to address workforce shortages, training needs and future demand across health and community sectors. All committees have raised that an expanded, capable and supported workforce is needed to address equal access to mental health services for people with multiple psychosocial, cultural, mental health and alcohol and other drug needs across the life-span. Initiatives include training and growing the Aboriginal workforce and peer workforce, sector capacity building, implementing trauma-informed care, international and local recruiting, graduate recruitment and developing training pipelines across professions.

### **Lived Experience Leadership Sub-Committee**

The lived-experience members of the MHEC and CMC proposed the establishment of a Lived Experience Leadership Sub-Committee (LELS) to guide the MHEC and CMC in leading a mental health, alcohol and other drug system that is consumer-focused and consumer-led. The MHEC endorsed the establishment of the LELS and provided feedback on the terms of reference and membership. The importance of a broad membership with the diversity of the community it represents across ages, cultures and genders was raised across all committees. The connection to Consumer and Carer Advisory Groups in health services and with Consumers of Mental Health WA (CoMHWa) will be developed.

Members agreed that lived-experience is required at all levels of the system however success will depend on ongoing education and support for staff to incorporate lived-experience approaches and peers into their practice on an ongoing basis.

### **Culturally-safe care for Aboriginal consumers**

[The Mental Health Advocacy Service Inquiry into Services for Aboriginal and Torres Strait Islander People and Compliance with the Mental Health Act 2014](#) was provided to the previous Minister for Mental Health, Hon Roger Cook MLA, in 2020. The 15 recommendations suggest changes to ensure policies and procedures uphold the rights of Aboriginal people under the Act, and that Aboriginal people have access to Aboriginal mental health workers traditional healers, elders and community members.

The MHC, DoH and Health Service Providers are committed to progressing the recommendations in the report through leadership, collaboration and coordination of roles.

### **Other Items of note:**

Other topics that were on the MHEC agenda for noting include:

- establishment of a Mental Health Transport Steering Group led by the Department of Health
- finalising the Young Peoples Priority Action Plan across government,
- Criminal Law (Mental Impairment) Bill Reform Bill progress
- Chief Psychiatrist's Review - [Building rehabilitation and recovery services for people with severe enduring mental illness and complex needs – including those with challenging behaviour \(2020\)](#).

The [WA State Priorities Quarterly Update](#) October 2021 on all system reform projects underway was endorsed by MHEC and is available on the [MHC website](#).

### **The next MHEC meeting is scheduled for 15 March 2022.**

*Please feel free to distribute this Communique to your wider networks. Communiques and other relevant documents for the MHEC and CMC are available on the [MHC's website](#).*