

Queensland Plan for Mental Health 2007-2017



The Queensland Plan for Mental Health 2007-2017

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Message from the Minister for Health

I am very pleased to present the *Queensland Plan for Mental Health 2007-2017*. The plan outlines priorities for the reform and development of mental health care over the next ten years.

The demand for treatment and support for people with mental illness continues to grow. Currently one in five adult Australians experience a mental illness in any one year. Depression is predicted to rise from the fourth to the second greatest cause of global disease burden over the next twenty years.

As part of the 2007-08 State Budget the Queensland Government committed a record \$528.8 million over four years to improve Queensland's mental health system. This unprecedented level of funding, the largest investment in mental health in Queensland's history, reflects the Government's deep commitment to delivering a better quality of life for people who live with mental illness, their families and carers.

In 2008-09 a further \$88.63 million has been allocated over four years to continue implementation of this Plan bringing the total Government commitment since July 2007 to \$617.43 million.

The *Queensland Plan for Mental Health 2007-2017* provides a blueprint for reform and will inform future investment in mental health services across the State. The directions outlined in the Plan establish a framework for the development of a more responsive system of services to better meet the needs of people who live with a mental illness.

Public mental health services will continue to play a major role, with the contribution of other sectors involved in the delivery of mental health care clearly highlighted. There is a much stronger role for non-government organisations, and major contributions from all levels of government.

The *Queensland Plan for Mental Health 2007-2017* has been informed by extensive consultations undertaken with mental health consumers, carers, service providers and key stakeholders.

Five priority areas for action have been identified. These priorities position mental health services to be better able to respond to existing and future demand for care, by building on the strengths of the current system, developing an appropriate mix and level of services and implementing new and innovative approaches to consumer and carer needs.

The priorities are:

- promotion, prevention and early intervention
- improving and integrating the care system
- participation in the community
- coordinating care
- workforce, information, quality and safety.

Effective partnerships around mental health care are essential. Improving collaboration between the public sector, private sector, non-government organisations, other agencies and departments and the broader community to respond to the needs of people who live with a mental illness, their families and carers is a prime aspect of the *Queensland Plan for Mental Health 2007-2017*. The reform of mental health care over the next ten years relies on these partnerships and the participation of the broader community.

I look forward to working with you as we further develop and implement our vision for mental health in Queensland.

Stephen Robertson MP
Minister for Health

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1. A vision for mental health

Throughout the world, mental disorders are common, affecting more than 20% of all people at some time during their lives. Mental health problems are universal, being experienced by people of all countries, by women and men of any age and socioeconomic status, and in urban and rural environments.

Mental disorders are the largest single cause of disability within Australia accounting for nearly 30% of the burden of non-fatal disease. In Queensland, it is estimated that 16.6% of the population is affected by mental disorders in any one year (further detail provided below).

A complex interplay of biological, psychological, social, economic and environmental factors influence mental health. This is true for all Queensland people, but has particular significance for some population groups, especially Aboriginal and Torres Strait Islander people who view social and emotional wellbeing holistically. Mental health status also influences access to various community resources and capacity to participate in society.

Meeting the mental health needs of Queensland's rapidly growing population poses challenges for governments, policy makers, researchers, service providers and communities. Queensland remains one of the fastest growing states in Australia with the population predicted to grow from 4 million to 5.6 million by 2026.

Mental illness in Queensland

- It is estimated that 16.6% of the Queensland population is affected by mental disorders in any one year (excluding dementia and alcohol and drug-related disorders, except where co-existing with another mental disorder).
- The figure rises to about 22% when alcohol and drug-related conditions are included.
- Anxiety-related and depressive disorders are the most prevalent, affecting approximately 7% and 6% of the population within any year respectively.
- Almost 2.5% of Queensland people experience severe mental disorders. About half of this group have a psychotic disorder and the remainder experience major depression or severe anxiety disorders and disabling forms of other disorders such as anorexia nervosa.
- Approximately 4.5% have a mental disorder of moderate severity, including depression, generalised anxiety disorder, post-traumatic stress disorder and panic disorder/agoraphobia.
- A further 9.6% have a disorder of mild severity and are at risk of recurring or continuing mental disorders.

*Queensland Health, 2007**

** Australian and international sources have been used as Queensland-specific prevalence data of comparable coverage and quality are not available.*

EXHIBIT 208



While public mental health services in Queensland have undergone significant development in the last decade, there is a growing recognition that mental health is not solely the responsibility of the mental health treatment sector. Other sectors, in particular housing, disability and employment, play important roles in an individual's mental health and wellbeing, and on the broader social health of the community.

Each of these sectors together with education and training, child safety, police and emergency services, corrections and justice and community services, have a key role in maximising the mental health of Queenslanders.

The vision of the *Queensland Plan for Mental Health 2007-2017* is to facilitate access to a comprehensive, recovery-oriented mental health system that improves mental health for Queenslanders. The Plan aims to develop a coordinated approach that provides a full range of services that:

- promote mental health and wellbeing
- where possible prevent mental health problems and mental illness
- reduce the impact of mental illness on individuals, their families and the community
- promote recovery and build resilience
- enable people who live with a mental illness to participate meaningfully in society.

The mental health sector needs to build stronger partnerships with consumers, families, carers, and government and non-government services to achieve better outcomes for Queenslanders.

The delivery of recovery-oriented services is central to the Plan. Recovery is an emerging paradigm that has significant implications for people with a mental illness, families, carers and service providers. Recovery refers to a person's improved capacity to lead a fulfilled life that is not dominated by illness and treatment. The recovery approach does not focus on reduced symptoms or need for treatment alone, but on the person experiencing improved quality of life and higher levels of functioning despite their illness.

Recovery is an individual's journey toward a new and valued sense of identity, role and purpose outside the boundaries of mental illness. Recovery-oriented services assist an individual to live well despite any limitations resulting from their mental illness, its treatment, and personal or environmental conditions.

Recovery means that over time, individuals come to terms with their illness, learning how to accept and move beyond it. They learn to believe in themselves, identify strengths as well as limitations and find purpose and enjoyment in their lives, despite their illness. Services supporting individuals with mental illness have to focus on the potential for growth within the individual and acknowledge that individuals with mental illness are active participants in the recovery process.

Recovery acknowledges that having a mental illness does not necessarily mean life long deterioration. People with a mental illness are recognised as whole, equal and contributing members of our community, with the same needs and aspirations as anyone else. As a result, when working to facilitate recovery, the basic elements of citizenship need to be considered, such as ability to live independently, form social relationships and access employment opportunities. In doing this it is important that all relevant stakeholders adopt and are supportive of recovery-oriented service provision.

Sharing Responsibility for Recovery: creating and sustaining recovery-oriented systems of care for mental health. Queensland Health, 2005

People living with mental illness can and do recover to live productive lives in their communities. Recovery emphasises the need for a comprehensive community-based service system that works to address the full impact of mental illness. The improvement of mental health treatment services in isolation will not address all the issues related to the support of people with mental illness and their recovery.

There is growing recognition that a whole-of-government, whole-of-community approach is necessary to reduce the prevalence and impact of mental health problems and mental illness. The *Queensland Plan for Mental Health 2007-2017* brings together the sectors that impact on the mental health of individuals, their families, carers and communities.

The Plan recognises that a range of sectors including housing, education, training, employment, community support, health, corrections, justice, disability, police, emergency services and child safety have important roles to play in promoting mental health and reducing the impact of mental health problems and mental illness. A stronger role is envisaged for the non-government sector as a key partner in delivering comprehensive community based care and support.

Working collaboratively, these sectors have an important role to play in promoting the mental health and wellbeing of the general population, and assisting with the recovery of those experiencing mental health problems and mental illness.

“ *The vision of the Queensland Mental Health Plan 2007-2017 is to facilitate access to a comprehensive, recovery-oriented mental health system that improves mental health for Queenslanders.* ”



2. Achievements to date

The Queensland Government is building a better mental health system by improving the quality, range and access to mental health services. In October 2005, as part of the *Health Action Plan*, \$201 million was allocated over five years to boost mental health services in Queensland. Beginning in July 2006 this funding was used to:

Increase mental health service capacity throughout Queensland

- Across Queensland, 193.5 new positions were established at a cost of \$18 million per year. These new positions have increased access to community mental health services for people with mental illness by reducing waiting times and case loads.
- Forensic mental health services were expanded to improve services to people with mental illness who have been in contact with the criminal justice system. Specialised community forensic and court liaison services were enhanced with an additional 27 positions at a cost of \$3.16 million per year. This included the creation of the position of Director of Forensic Mental Health Services to provide statewide leadership and oversight of forensic mental health services.
- Additional funding of \$11.62 million per year was provided to assist in reducing pressure on existing services by increasing resources in Emergency Departments, acute inpatient treatment settings and other areas of significant demand.

Build the capacity of the non-government sector to support people with mental illness in the community

- Funding to community organisations was increased by \$5 million per year, including grants to 18 non-government organisations across Queensland to provide independent living skills and social support services to people with mental illness living in the community.

In recognition of the substantial social and economic impact of mental illness on individuals, families and the wider community, the Queensland Government committed to the Council of Australian Governments (COAG) *National Action Plan on Mental Health 2006-2011* ('the NAP') as part of the continued reform of mental health services in Australia. The initial commitment of \$366.2 million announced in July 2006 included the \$201 million provided under the *Health Action Plan* and a range of other mental health-specific initiatives funded within Queensland Health and other government departments.





In addition to the *Health Action Plan* enhancements previously listed, major initiatives funded in the initial COAG commitment include:

- the Housing and Support Program as a collaborative service initiative between the Department of Housing, Queensland Health, Disability Services Queensland and the Department of Communities. This program provides coordinated social housing, clinical treatment and non-clinical support to enable people with moderate to severe mental illness and psychiatric disability to live successfully in the community. The program included a \$20 million capital investment from the Department of Housing with clinical and disability support services funded by Queensland Health and Disability Services Queensland. A total of 80 supported social housing places were provided in 2006-07.
- development of service delivery hubs in a range of locations to provide integrated services to people in high areas of need. These included Early Years Service Centres, Blueprint for the Bush Service Delivery Hubs and Indigenous Domestic and Family Violence Counselling Services established by the Department of Communities. These hubs are designed to provide a comprehensive range of services, including mental health services, with a focus on children and families, rural communities, and Aboriginal and Torres Strait Islander people.

During 2006, Queensland Health also provided \$640,000 to seven Divisions of General Practice across Queensland for the implementation of the 'Partners in Mind' framework. This approach, which has been agreed between Queensland Health and General Practice Queensland, will establish a better integrated primary mental health care sector.

The 2007-08 Queensland State Budget provided an additional commitment of \$528.8 million over four years to expand the initial Queensland COAG mental health initiatives. This brings the total new investment

in mental health by the Queensland Government to \$895 million over the five years from 2006-11. This funding and the broad program of mental health reform are the focus of this Plan and are outlined in detail in Chapter 6.

These commitments will enable further development of the substantial network of District Mental Health Services, other government and non-government services in Queensland.

Currently the mental health inpatient system consists of more than 1,400 beds. During 2007-08, District Mental Health Services provided over 374,000 days of inpatient care. In addition, more than 2,000 staff were employed within community mental health services, and for the first time delivered more than 1.1 million occasions of services to Queenslanders with mental illness living in the community.

“The Queensland Government is building a better mental health system by improving the quality, range and access to mental health services.”

3. Providers of mental health services in Queensland

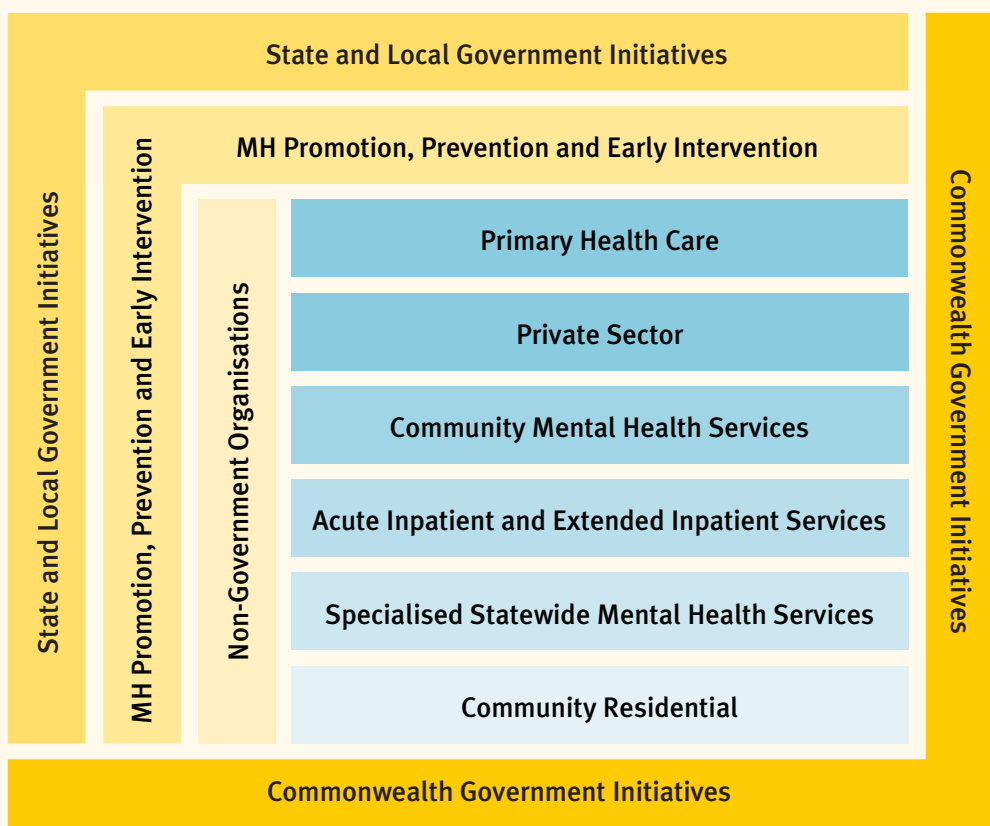
Mental health care in Queensland is delivered by a range of providers operating within and across different sectors. There are significant areas of interface between these sectors, as demonstrated in Figure 1.

The mental health treatment sector, supported by the broader health sector, has clear responsibility for delivery of a range of clinical assessment and treatment services. The mental health treatment sector includes both public and private providers.

They provide crisis response, acute, non-acute and continuing treatment services in inpatient and community settings.

A wide variety of other interventions, which support mental health and recovery, are provided by the broader government and non-government sectors. These may include services delivered by a housing or employment agency, or personal care from a non-government community support provider.

Figure 1: Queensland Mental Health Service System





Public mental health services are provided in each of the 20 Queensland Health Service Districts. They deliver specialised assessment, clinical treatment and rehabilitation services to reduce symptoms of mental illness and facilitate recovery. These services focus primarily on providing care to Queenslanders who experience the most severe forms of mental illness and behavioural disturbance, including those who are subject to the provisions of the *Mental Health Act 2000*.

Public mental health services work in collaboration with primary health and private sector health providers.

Primary health care providers include general practitioners, community health workers, nurses, allied health professionals, school health nurses, counsellors and community support groups. Their role includes assisting individuals with mental health problems and facilitating access to specialist public and private mental health services when required.

Private mental health services are delivered by psychiatrists, mental health nurses, clinical psychologists, social workers, occupational therapists and other allied health professionals with expertise in mental health care. They provide a broad range of services largely through office-based private practice and inpatient care within private hospitals, including dedicated private psychiatric hospitals.

Non-government organisations include not-for-profit community agencies, consumer, family and carer groups and other community-based services that provide a range of treatment, disability support and care services, which complement both public and private mental health services. Non-government organisations are the primary providers of psychiatric disability support for people with mental illness and play an important role in promoting and maintaining mental health and wellbeing.

All sectors, including public mental health services, other government agencies and non-government organisations are involved in identifying and intervening early with people who are at risk of developing mental illness and facilitating timely and effective recovery-oriented pathways to care. Key groups requiring particular attention in **mental health prevention and early intervention** include children of parents with mental illness, children and youth who have experienced, or are at risk of abuse/neglect, and young people displaying behaviour disturbances, and their families.

A safe environment, adequate income, meaningful social and occupational roles, secure housing, higher levels of education and social support are all associated with better mental health and wellbeing. Queensland Government departments are actively working together to deliver programs that aim to strengthen mental health and promote recovery, across the spectrum of interventions. Ensuring mental health services respond as effectively as possible to the needs of consumers, families, carers, and the broader Queensland community requires effective coordination and collaboration between these sectors and across the spectrum of interventions.

From July 2007, responsibility for funding of mental health services that are contracted from the non-government sector was transferred from Queensland Health to Disability Services Queensland (DSQ). This shift aligns responsibility for the development, implementation and management of mental health programs delivered through the non-government sector with other programs administered by DSQ in the community sector.

4. Purpose and scope of the Queensland Plan for Mental Health 2007-2017



The *Queensland Plan for Mental Health 2007-2017* provides a blueprint for reform of mental health care over the next ten years. It identifies interventions to be delivered by the different sectors to provide a system which is responsive to the needs of consumers, families and carers. This will reduce the burden of mental illness on individuals, families and the community. The Plan provides a framework which balances increases in the

capacity of public mental health services against an expanded and strengthened role for non-government services and other areas of government. Collaboration and partnerships between these multiple stakeholders is pivotal in protecting the mental health of the Queensland community and supporting recovery for people living with mental illness.

“

Mission:

To provide a comprehensive, resilience and recovery-based mental health system across Queensland, with emphasis upon promotion, prevention and early intervention.”

”

The scope of the *Queensland Plan for Mental Health 2007-2017* has been influenced by the framework provided by the *National Mental Health Strategy* and Queensland Government policies and plans including:

- *National Mental Health Policy 1992*
- *National Mental Health Plan 1993-1998*
- *Second National Mental Health Plan 1998-2003*
- *National Mental Health Plan 2003-2008*
- *Council of Australian Governments National Action Plan for Mental Health 2006-2011*
- *Mental Health Statement of Rights and Responsibilities (1991)*
- *National Standards for Mental Health Services (1996)*
- *National Mental Health Information Priorities 2nd Edition*
- *National Action Plan for Promotion, Prevention and Early Intervention for Mental Health 2000*
- *National Practice Standards for the Mental Health Workforce (2002)*
- *National Action Plan on Perinatal Mental Health*
- *Aboriginal and Torres Strait Islander Social and Emotional Well-being Framework 2004-2009*
- *Key Performance Indicators for Australian Public Mental Health Services (2004)*
- *National Safety Priorities in Mental Health: A National Plan for Reducing Harm (2005)*
- *Ten Year Mental Health Strategy for Queensland (1996)*
- *Queensland Forensic Mental Health Policy 2002*
- *Queensland Mental Health Strategic Plan 2003-2008*
- *Queensland Health Systems Review (Forster, 2005)*
- *Queensland Health Action Plan 2005*
- *Queensland Statewide Health Services Plan 2007-2017*
- *Queensland Health Strategic Plan 2007-12*
- *Queensland Health Disability Services Plan 2007-12*
- *Queensland Plan for Multicultural Health 2007-2017.*

The *Queensland Plan for Mental Health 2007-2017* also builds on the recommendations of two key reports. The first, *Promoting Balance in the forensic mental health system - Final Report - Review of the Queensland Mental Health Act 2000*. The Review was charged with examining the efficacy of provisions in the *Mental Health Act 2000* and administrative arrangements relating to victims, as well as assessing whether associated arrangements achieve an appropriate balance between community safety considerations and the provision of rehabilitation to forensic patients.

The Queensland Government Response to the Final Report - Review of the Queensland Mental Health

Act 2000, details strategies to implement the Review recommendations.

The second, *Achieving Balance: The Report of the Queensland Review of Fatal Mental Health Sentinel Events*, is being implemented during the life of this Plan and will form the basis of the development of a mental health safety plan.

Planning parameters used in the development of the *Queensland Plan for Mental Health 2007-2017* were drawn from the information paper *Planning Estimates and Technical Notes for Queensland Mental Health Services*, prepared for the Mental Health Branch, Queensland Health.

5. Principles

The *Queensland Plan for Mental Health 2007-2017* articulates six principles to guide and support reform. Mental health intervention, care and service delivery across all sectors in Queensland should align with these principles.

Principle 1 – Consumer and carer participation

Consumers, families and carers are actively involved in all aspects of the mental health system

The mental health system will support active participation of consumers, families and carers in all aspects of activity including policy development and implementation, service planning and delivery, and research to ensure mental health care is oriented to meeting the specific needs of individuals.

Principle 2 – Resilience and recovery

The mental health system promotes resilience and recovery

Mental health care will be provided within an operational framework that promotes resilience and recovery.

Principle 3 – Social inclusion

The mental health system is community-oriented, comprehensive, integrated and socially inclusive

Consumers, their families and carers will have access to a comprehensive community-based system of treatment, care and support that promotes recovery and works in a positive manner to address the impact of mental illness.





Principles

Principle 4 – Collaboration and partnerships

Cooperation, collaboration and partnerships are key elements of the mental health system

The mental health system will operate through inter-sectoral cooperation, collaboration and partnerships with a range of stakeholders including consumers, families and carers.

Principle 5 – Promotion, prevention and early intervention

Promotion, prevention and early intervention are integral to the mental health system

Promotion, prevention and early intervention (PPEI) will occur at the population, group and individual level, to build individual and community resilience and wellbeing, effectively target key risk and protective factors, and facilitate early intervention.

Principle 6 – Evidence-based

Mental health care is evidence-based, prioritising quality and safety

High quality services will be accessible and responsive, informed by research and evidence of best practice, provided by a suitably skilled and supported workforce, and deliver improved outcomes to people living with mental illness, their families and carers, and the wider community.

The principles that underpin the *Queensland Plan for Mental Health 2007-2017* are in addition to the principles articulated within the United Nations *Principles for the Protection of Persons with Mental Illness and the Improvement of Mental Health Care*, the *National Mental Health Strategy* and the *Queensland Mental Health Act 2000*.

These frameworks encompass fundamental rights and responsibilities for all people who have a mental illness, including the following:

- People with mental illness are entitled to respect for their basic human rights, confidentiality, and must be able to participate in decisions made about them.
- The specific cultural, religious and language needs of individuals must be respected.
- Treatment should only be provided where it promotes or maintains the person's mental health, and should impose the least restriction on their rights possible with due regard for the safety of the person and others.

6. The reform agenda – improving mental health for Queenslanders

Five priorities guide the reform of the mental health system. These priorities will inform the investment over the period 2007-2017. These priorities and the associated strategies are consistent with the COAG *National Action Plan for Mental Health 2006-2011*.

The needs of consumers, families and carers drive each of the priorities. The involvement of consumers, families and carers in these areas will be instrumental in achieving change. Strengthening the mechanisms through which consumers, families and carers can influence reform of the Queensland mental health system in meaningful and effective ways must occur within each priority and all aspects of activity.

The five priorities have application across the spectrum of intervention and cover both clinical and non-clinical aspects of care. All components of the system are necessary for the system to function effectively. Development of a detailed service model that identifies target levels of resources required for each service

component is a key objective of the Plan, to ensure achievement of a balanced system over the next ten years.

These targets will be based on interpretation of trends in national and international planning and reflect best available knowledge at this point in time. The targets cover all components of priority areas and will be continually tested against experience as new services are developed. Ongoing developments in mental health care at the international and national level will be taken into consideration, in association with identification and analysis of local community needs.



The Queensland Plan for Mental Health 2007-2017

Priorities for reform

<p>PRIORITY 1 Promotion, prevention and early intervention</p>	<p>Strengthen collaborative action to:</p> <ul style="list-style-type: none"> • build individual and community resilience and wellbeing • effectively target key risk and protective factors • facilitate early intervention in known high risk groups for mental illness.
<p>PRIORITY 2 Improving and integrating the care system</p>	<p>Enhance and develop the continuum of clinical mental health treatment and care for consumers, families and carers. This system will promote resilience and recovery.</p>
<p>PRIORITY 3 Participation in the community</p>	<p>Build capacity to assist and support people with mental illness to live full and meaningful lives in the community.</p>
<p>PRIORITY 4 Coordinating care</p>	<p>Facilitate the linkage of a range of services to provide an integrated system of care to consumers, families and carers.</p>
<p>PRIORITY 5 Workforce, information quality and safety</p>	<p>Enhance and strengthen the capacity of services to provide high quality, safe and evidence-based mental health care.</p>

PRIORITY 1

Mental health promotion, prevention and early intervention

Strengthen collaborative action to:

- *build individual and community resilience and wellbeing*
- *effectively target key risk and protective factors*
- *facilitate early intervention in known high risk groups for mental illness.*

Key actions

- Establish statewide leadership through the Queensland Centre for Mental Health Promotion Prevention and Early Intervention (PPEI)
- Improve mental health literacy and capacity in non-clinical workers in key government and non-government services
- Strengthen responses for perinatal and infant mental health
- Reduce suicide risk and mortality within Queensland communities, within identified high risk groups such as Aboriginal and Torres Strait Islander populations, rural communities, and young people

Promotion, prevention and early intervention (PPEI) activities are vital elements in reducing the burden of disease associated with mental health problems and illness, and managing future demand for mental health services. PPEI addresses the health and wellbeing of the entire population, including all levels of mental health need within the community, and requires the contribution of a wide range of government and non-government agencies. Strengthening partnerships with these agencies and building their capacity to effectively contribute to the mental health and wellbeing of all Queenslanders is a priority.

Development of strategic partnerships across the government and non-government sectors aimed at improving mental health literacy, reducing stigma and discrimination experienced by people affected by mental illness, and targeting risk and protective factors for the prevention of high prevalence disorders is essential. Building supportive and inclusive environments, and resilient individuals and communities are also important tasks in promoting mental health into the future. Public mental health services play an important role in mental health PPEI through partnerships focused on intervening early with high risk groups and delivery of recovery-oriented services.

Actions for 2007-11

An additional \$9.35 million will be provided over four years to support activities which will build mental health promotion, prevention and early intervention capacity.

The Queensland Government will implement initiatives focused on enhancing and promoting mental health and wellbeing, preventing mental illness and providing early intervention, including:

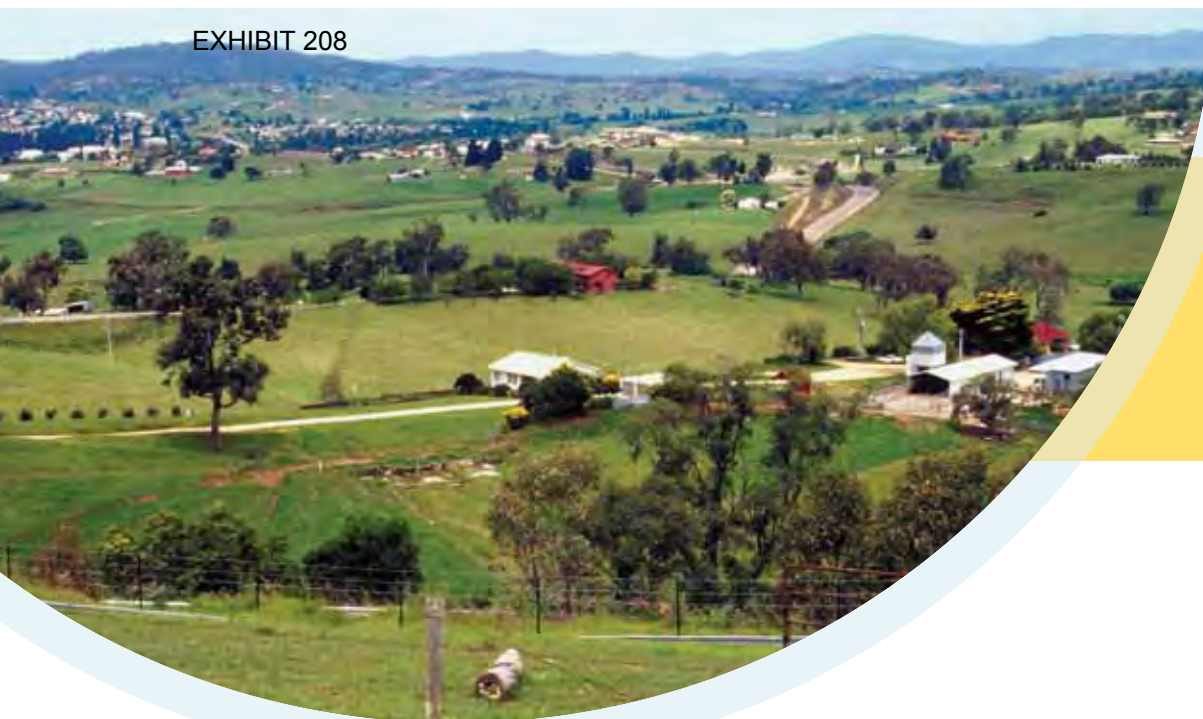
- \$5.47 million to establish the Queensland Centre for Mental Health Promotion, Prevention and Early Intervention to lead the development and implementation of a statewide framework for mental health promotion, prevention and early intervention including:
 - establishing the *beyondblue* Queensland Chapter to engage with the National Depression Initiative to promote recognition and early access to treatment for depression
 - improving mental health literacy and access to mental health first aid training for non-clinical workers in key government and non-government services
 - raising community awareness about mental illness, and reducing stigma and discrimination
 - promoting the use of innovative technologies in mental health promotion activities.

EXHIBIT 208



- \$2.91 million to support the ongoing development of cross-sectoral strategies, partnerships and agreements targeted at reducing suicide risk and associated mortality, including:
 - dedicated strategies to reduce suicide risk and mortality with a focus on specific high risk groups including Aboriginal and Torres Strait Islander populations, rural communities, and young people
 - development of a risk management framework for the detection and management of suicide risk
 - development of mechanisms to review all available information in relation to people who suicide in Queensland
 - increased capacity to follow-up people presenting to Emergency Departments with deliberate self-harm or attempted suicide.
- \$0.97 million to establish a hub of expertise in perinatal and infant mental health to provide co-case management, consultation, liaison, and support to public mental health services and the broader community sector.
- Providing training to health workers in hospital, community health and primary health care settings on psychosocial risk assessment, screening and pathways into care consistent with the *National Action Plan on Perinatal Mental Health*.
 - Establishing processes for the early detection and psychosocial support of children of parents with mental illness.
 - Establishing collaborative processes and interdepartmental partnerships to improve mental health problems in children and young people within education, justice and child protection settings.
 - Developing partnerships and increasing access to education and training initiatives to enhance the capacity of the aged care sector to prevent and intervene early in mental health problems and reduce social isolation.
 - Developing and implementing early detection and intervention with children and young people including enhanced consultation liaison, improved referral pathways, and training for school support personnel and other key providers such as youth support coordinators, child safety workers, and youth justice workers.
 - Establishing programs that build individual and community resilience and capacity, including those targeting Aboriginal and Torres Strait Islander populations, people from Culturally and Linguistically Diverse backgrounds, and other high risk groups.

EXHIBIT 208



Outcomes by 2011

These initiatives will strengthen the capacity to promote mental health and wellbeing and to prevent and minimise the risk of mental illness developing, especially in high risk populations. By 2011 the Queensland Government will have delivered the following outcomes:

- established a statewide framework for mental health promotion, prevention and early intervention
- implemented a range of targeted, evidence-based mental health promotion, prevention and early intervention programs across government, non-government and community sectors
- implemented models to ensure early detection of 'at risk' populations
- improved the capacity to build community resilience to mental illness
- improved the response to suicide risk behaviours and the management of suicide risk.

Outcomes by 2017

By 2017, the Queensland Government will have:

- delivered whole-of-population mental health PPEI initiatives across government, non-government, and community sectors
- improved community awareness, understanding and attitudes towards mental health and mental illness
- established collaborative, evidence-based, mental health and early intervention initiatives across the lifespan
- established collaborative, evidence-based mental health prevention and early intervention to targeted high risk groups
- implemented and evaluated a comprehensive approach to suicide prevention and suicide risk management
- developed collaborative initiatives to address the mental health needs of specific communities and targeted populations.

“ *Promotion, prevention and early intervention activities are vital in reducing the burden of disease associated with mental health problems and issues.* ”

PRIORITY 2

Integrating and improving the care system

Enhance and develop the continuum of clinical mental health treatment and care for consumers, families and carers. This system promotes resilience and recovery.

Key actions

- Strengthen consumer, family and carer participation in mental health services
- Establish a statewide model of service to facilitate integrated service delivery across child and youth, adult, older persons, statewide and specialised mental health services
- Increase the capacity of community and inpatient mental health services to deliver high quality, responsive, consumer-focused care
- Build collaborative links with primary health and private sector providers to ensure effective links between services and efficient use of resources

Access to the right care and support at the appropriate time is important for people living with mental illness. A range of inter-connected clinical and community service options are required. These need to be responsive to the needs of people with mental illness, promote resilience and recovery, and facilitate positive outcomes.

Primary health, private and public mental health treatment services are all engaged in the delivery of assessment and treatment. Together they contribute to a spectrum of services required to meet the needs of people with mental health problems and mental illness. Close collaboration between providers will minimise the risk of duplication, service gaps and disconnections across the continuum of care.

The Plan focuses on fostering partnerships and improving linkages between services provided within and across the primary health, public and private specialist mental health sectors. It aims to improve access, support optimal care across all service levels and ensure effective use of specialised treatment resources. Innovative approaches to achieve improved continuity of care are proposed.

Actions for 2007-11

An additional \$345.8 million will be provided over four years to further expand mental health treatment and service capacity across sectors.

Consumer and carer participation

The Queensland Government will implement initiatives focused on enhancing the capacity of consumers and carers to be actively involved in mental health service planning and delivery. This includes:

- \$2.97 million to employ additional Consumer Consultants to provide support to consumers and to improve consumer engagement within mental health services
- developing a Queensland Government Consumer, Family and Carer Participation Policy
- establishing a statewide Consumer and Carer Coordinator position to coordinate consumer and carer service development initiatives and participation
- providing education and training to consumers, families and carers, mental health service providers and government and non-government staff to enable informed participation by consumers and carers in service delivery.

Primary and private sector mental health care

The Queensland Government will support the development of a coordinated framework for the delivery of primary and private mental health care. This includes:

- \$3.24 million to employ additional Primary Care Liaison Coordinators to improve coordination of services between primary health care and public mental health service providers.
- \$1.42 million to support the implementation of the 'Partners in Mind' framework and its integration with the Queensland Primary Mental Health Care Collaborative and community health services.
- establishing a forum for the public and private mental health sectors to collaborate and implement a plan for alignment of the two sectors with the aim of achieving a continuum of care for consumers moving between them. This would include communication protocols for access and reporting.
- delivering programs of collaborative care between general practitioners, other primary care providers and mental health professionals, particularly in rural and remote areas.
- \$11.55 million for 25 additional clinicians to provide mobile intensive treatment services to consumers with complex needs living in the community
- \$27.47 million for 60 additional clinicians to provide extended hours community-based emergency triage and brief acute treatment
- \$9.63 million for 18 additional consultation liaison clinicians to support early assessment, treatment and referral of mental health consumers
- \$10.5 million to employ 27 additional clinicians to provide tertiary statewide forensic services including, child and youth community forensic outreach, prison mental health, and court liaison services
- \$5.7 million to employ 26 additional administrative staff to support clinicians working in community mental health services
- \$15.32 million to expand district service and development capacity by establishing additional clinical leaders, supervisors and other staff to manage legislative, quality and safety activity.

Mental health services to people receiving care in acute, extended and community mental health settings will be improved by providing:

Public mental health care

The Queensland Government will implement initiatives focused on expanding mental health care. This includes:

- \$37.78 million for 100 additional clinicians to provide child and youth community mental health services
- \$9.44 million for 22 additional clinicians to provide adult community mental health services
- \$18.7 million for 46 additional clinicians to provide older persons community mental health services
- \$121.55 million to expand the range of acute and extended treatment beds by providing 140 new beds and to upgrade existing services to meet contemporary standards. This is in addition to the services being provided as part of the development of the new Gold Coast, Sunshine Coast and the Queensland Children's Hospitals.



- standardised service models and protocols for core public mental health service functions, including entry criteria, case management and inter-sectoral collaboration.
- protocols for inter-hospital transfers and referrals to Queensland Health Service Districts providing specialist services.

Mental health services to people in **rural and remote** areas will be improved by providing:

- \$2.36 million to develop a service model for rural and remote mental health services in collaboration with the Centre for Rural and Remote Mental Health Queensland, and to develop innovative mechanisms to improve recruitment, retention and development of mental health staff in rural and remote areas
- Programs developed in collaboration with the Centre for Rural and Remote Mental Health Queensland and the Queensland Centre for Mental Health Promotion Prevention and Early Intervention to promote mental health and prevent the development of mental health problems in rural and remote communities.

Mental health services to people from an **Aboriginal and Torres Strait Islander** background will be improved by providing:

- \$5.15 million to employ additional Aboriginal and Torres Strait Islander mental health workers to provide assessment, treatment and care to people with a mental illness who are from an Aboriginal and Torres Strait Islander background
- a specialist hub of expertise to provide leadership and oversight of development of service models,

workforce and partnerships in collaboration with the Centre for Rural and Remote Mental Health Queensland. The specialist hub will provide support to Aboriginal and Torres Strait Islander workers in the development and delivery of clinical services.

Mental health services to people from a **culturally and linguistically diverse** background will be improved by providing:

- \$1.8 million for additional clinicians to provide transcultural mental health services. These clinicians will help to improve the capability of mental health services to respond to the needs of people with a mental illness from a culturally and linguistically diverse background.
- programs to increase mental health literacy and reduce stigma and discrimination in culturally and linguistically diverse communities.
- support to the Queensland Transcultural Mental Health Centre in implementing the mental health components of the *Queensland Plan for Multicultural Health 2007-12*.

“ Access to the right care and support at the appropriate time is important for people living with mental illness. ”

Mental health care for people who have a co-existing mental illness and **drug and alcohol problem** will be improved by providing:

- \$2.92 million to establish dual diagnosis coordinators to facilitate the provision of coordination between mental health and drug and alcohol services, and to provide training and skill development for mental health services
- statewide guidelines for mental health services to ensure routine screening of all consumers for drug and alcohol problems and the provision of brief therapeutic interventions.

Initiatives are being progressed by Queensland Health, the Department of Justice and Attorney-General, and the Mental Health Review Tribunal to improve management of **people with mental illness who commit serious offences** and to increase support for victims of violent offences committed by people who are found of unsound mind or unfit for trial under the *Mental Health Act 2000*.

Initiatives include:

- \$0.8 million to improve community and stakeholder understanding of the forensic mental health system as part of the recommendations from the Review of the *Mental Health Act 2000* by developing mental health literacy materials, culturally targeted resources and a media professionals' package.
- \$29.18 million to enhance clinical services for adult forensic mental health consumers and to improve risk management practices. Funding will:
 - establish 35 additional positions
 - improve specialist and district based forensic services and increase the number of Indigenous mental health workers
 - provide risk management training and monitor and report on compliance with forensic mental health policy and legislation.

- \$10.24 million to establish a statewide Victim Support Service and a Victim Information Register.
- \$13.34 million to improve the forensic legal processes related to the Mental Health Court and the Mental Health Review Tribunal.

There will be ongoing liaison with Queensland Corrective Services in relation to victims of serving sentence prisoners. The benefits of Queensland Health providing ongoing support, liaison and service provision to offenders with mental illness is acknowledged. This cross departmental relationship is essential to the continued health and wellbeing of offenders accessing health care within any Queensland Corrective Services centre.

The Queensland Government will improve the provision of mental health services to people who have **complex mental health** needs by providing:

- \$0.97 million to employ additional positions to boost the capacity to coordinate services for people with complex needs related to intellectual disability and mental illness
- \$2.71 million to establish positions to build capacity to provide assessment and treatment for people with eating disorders in the community
- \$1.12 million to establish positions to enhance the capacity to provide assessment and treatment for people with mental illness and a visual or hearing impairment
- additional funds to Disability Services Queensland to employ clinicians to provide services for people with an intellectual disability and mental illness, as part of the response to the recommendations of the Hon. W.J. Carter's review and resulting report *Challenging Behaviour and Disability: A Targeted Response*.



Outcomes by 2011

These initiatives will enhance service delivery and expand the range of services provided to meet the needs of a growing population. By 2011, the Queensland Government will have delivered the following outcomes:

- Improved consumer and carer representation at all levels of mental health activity and decision making.
- Implemented a coordinated framework for the delivery of primary, private and public mental health services.
- Expanded community public mental health services with the employment of additional clinical staff across child and youth, adult and older person services in the community. By 2011 the number of clinical staff employed in community public mental health services is expected to increase by 21%. This increase will mean that there will be 48 full time staff per 100,000 of the total population. This represents an estimated progress of up to 68% towards achievement of a ten year target rate of 70 full time equivalent staff per 100,000 population.
- Expanded access and capacity to deliver specialist mental health care services for people within special populations or with complex needs.
- Expanded and improved the infrastructure of hospital and community based inpatient services towards a ten year target of 40 beds per 100,000 total population for acute and extended inpatient services.

Outcomes by 2017

By 2017, the Queensland Government will have:

Public mental health services

- increased effective consumer, family and carer participation in public mental health services
- provided effective consumer and carer advisory systems
- facilitated cross-sector care for consumers, families and carers
- established a consistent model of service provision for the delivery of mental health services
- expanded the capacity of community mental health services
- provided sufficient mental health inpatient beds that reflect contemporary standards and population needs
- improved access and entry to mental health care for consumers, families and carers
- improved capacity to provide comprehensive mental health care to children and young people aged 15-25
- improved capacity to respond to mental health needs of older persons
- improved capacity to provide mental health services to people in rural and remote areas
- improved capacity to respond to the mental health needs of Aboriginal and Torres Strait Islander people
- increased capacity to deliver Forensic Mental Health Services
- provided effective models of mental health service delivery to people with a mental illness and drug and alcohol problems (dual diagnosis)
- provided culturally appropriate responsive services to people from culturally and linguistically diverse backgrounds
- strengthened delivery of consultation-liaison services across Queensland
- provided a continuum of care for people with eating disorders



- strengthened local capacity to provide specialist mental health care to people who are deaf and/or blind
- strengthened local capacity to provide specialist mental health care to people with intellectual disability
- strengthened local capacity to provide specialist mental health care to people with acquired brain injury
- strengthened local capacity to provide specialist mental health care to people with severe mood disorders
- expanded capacity to respond to people with mental illness who are homeless.

Primary Care

- developed planning and leadership for cross-sector primary mental health care
- strengthened partnership processes between primary, private, public and non-government providers of mental health care.

Private Sector Mental Health Care

- engaged private, primary and community sectors in local-level planning with public mental health services
- established greater collaboration between private psychiatrists, primary care services and public mental health services.

“The Plan focuses on fostering partnerships and improving linkages between services provided within and across the primary health, public and private specialist mental health sectors.”

PRIORITY 3

Participation in the community

Build capacity to assist and support people with mental illness to live full and meaningful lives in the community

Key actions

- Increase access to non-clinical recovery-focused services delivered through the non-government sector
- Expand access to supported housing and accommodation services for people with mental illness
- Increase capacity of Government agencies to support recovery of people with mental illness across a range of services

People living with mental illness require a range of services to strengthen their community engagement and improve quality of life. Stable housing, income support, education and employment are all vital for recovery, and require access to a range of government and non-government services.

The non-government and community sectors have a key role in providing non-clinical, personal care and other flexible supports to people living with mental illness, families and carers. Close partnerships will be required between Queensland Health, Disability Services Queensland and other government agencies, to ensure availability of the range of services required by people with mental illness within the community.

Actions for 2007-11

An additional \$98.09 million will be provided over four years to develop and implement programs that will increase access to community based services. These include:

Accommodation and personal support

The Queensland Government will expand the continuum of supported housing and accommodation available to people with mental illness in the community. Disability Services Queensland will purchase non-government sector services to provide non-clinical personal support and accommodation to

mental health consumers and their families. Initiatives include:

- \$35.64 million to purchase a range of accommodation and personal support services, including:
 - new residential recovery places to provide ongoing assessment, treatment and rehabilitation with the goal of assisting people to live successfully in the community
 - additional personal support packages to provide non-clinical support to people with varying levels of psychiatric disability living in the community in hostels, boarding houses, or in their own homes.
 - Additional places for consumer operated crisis and respite services to provide short-term accommodation, up to a maximum of three months, for those in need of respite, or emergency and crisis support.
 - Non-clinical personal support for people with a mental illness transitioning from corrective facilities to accommodation in the community.
- The Department of Housing, Disability Services Queensland and Queensland Health will expand the Housing and Support Program:
 - \$40 million to provide additional housing places for people with a severe mental illness who have moderate to high support needs. Eligibility criteria will require the person to be homeless or in acute



or extended treatment facilities, eligible for social housing and unable to maintain current housing arrangements without adequate support.

- \$22.45 million to provide non-clinical personal support to people with a severe mental illness who have moderate to high support needs and are living in social housing. Personal support services may include assistance with activities of daily living and practical support to access programs and services, which help to maintain optimal mental health functioning and promote recovery.

Vocational rehabilitation

The Queensland Government will support the implementation of initiatives to improve the engagement of people with a mental illness in vocational rehabilitation and employment, including:

- developing, implementing and evaluating a model of vocational rehabilitation which collocates an employment specialist within a mental health service
- establishing initiatives to foster the increased involvement of people with a mental illness in training, educational and employment readiness opportunities
- collaborating with non-government sector organisations to develop and provide a range of consumer-run vocational rehabilitation programs.

“ People living with mental illness need a range of services to strengthen their community engagement and improve quality of life. ”

Interagency coordination

The Queensland Government will support cross-sector collaboration to:

- develop and implement a strategic plan for the mental health non-government sector in Queensland, which enhances workforce capacity and infrastructure, service quality and review, and research, evaluation and outcome reporting
- develop and implement local cross-agency operational protocols and guidelines; local partnership agreements; and cross-agency education and professional development initiatives
- continue to implement and develop the Mental Health Intervention Program to improve collaborative responses between the Queensland Police Service, Emergency Services and public mental health services.

Outcomes by 2011

Investment of funds will improve the range of care and support for consumers living in the community. By 2011, the Queensland Government will have delivered the following outcomes:

- provided and maintained an expanded range of non-clinical personal support and accommodation aimed at assisting people with a mental illness to live a meaningful life in the community
- improved inter-sectoral collaboration in the delivery of programs to assist people with a mental illness to live and participate in the community.

Outcomes by 2017

By 2017, the Queensland Government will have:

- strengthened the capacity of non-government organisations to deliver a range of quality mental health services that promote recovery
- expanded the range of community-based supported housing and accommodation options for people with mental illness
- expanded non-government sector services for consumers, carers and families
- strengthened non-government capacity and government services in the criminal justice system
- increased vocational rehabilitation for people with mental illness
- improved access to education, training and employment opportunities for people with mental illness
- increased understanding of mental illness in non-government and government employees
- expanded mental health initiatives for police, mental health and emergency services.
- expanded cross-government capacity to provide a coordinated statewide mental health and psychosocial disaster response and enhanced participation in the community recovery response.
- improved the capacity of the non-government sector to deliver a range of mental health services in the community, towards a ten year target rate of:
 - 15 places per 100,000 population for residential recovery programs
 - 35 places per 100,000 population for supported social housing
 - 35 packages per 100,000 population for support to people with a mental illness living in hostels and private homes
 - 3 places per 100,000 population for crisis and respite services.

“ *The Queensland Government will expand the continuum of supported housing and accommodation available to people with mental illness in the community.* ”



PRIORITY 4

Coordinating care

Facilitate the linkage of a range of services to provide an integrated system of care to consumers, families and carers

Key actions

- Strengthen partnerships and collaborative initiatives between Government agencies to address mental health service priorities
- Establish Service Integration Coordinators to improve service integration across government and non-government providers
- Implement processes at the local level to support collaborative, coordinated care across government and non-government agencies and improve outcomes for people with mental illness and complex care needs

Commitment to coordinated care for people with mental illness and complex needs is a priority. The various elements of service provided to people with mental illness by organisations and services across sectors need to be integrated to ensure the best outcomes are achieved. A collaborative approach will minimise the risk of people of all ages including youth, falling through gaps in the service system and allow the various services to work together as inter-related parts of a single system of care.

Actions for 2007-11

\$4.77 million in funds will be provided over four years to strengthen the capacity to coordinate care for consumers with complex needs living in the community. This funding will support the establishment of Service Integration Coordinator positions across Queensland.

Service Integration Coordinator positions will be responsible for:

- improving care planning, communication and continuity across agencies
- overseeing processes for linking core service needs
- ensuring efficient utilisation of resources.

Queensland government agencies will work in partnership to develop coordinated responses to disasters to minimise psychological impact and facilitate community recovery, including increasing the availability of training and professional staff development.

In addition an Interagency Action Plan for an integrated human services framework to better respond to the needs of people with mental illness, their families and carers will be developed. Initially this plan will focus on people who are at risk of, or are experiencing social exclusion.

Outcomes by 2011

Investment of funds to support these initiatives will improve the coordination of care and support for consumers living in the community. By 2011, the Queensland Government will have delivered the following outcomes:

- improved capacity for people with a severe mental illness to successfully live in the community
- improved access to a range of support services and care for people with a severe mental illness in the community
- improved capacity for effective inter-sectoral collaboration to assist people with mental illness to access appropriate support and care in the community



- reduced the number of people with severe and persistent mental illness and psychiatric disability who currently fall through the gaps in service provision
- improved the degree to which people with a mental illness are socially included and able to participate in the community.

Outcomes by 2017

By 2017, the Queensland Government will have:

- established governance of mental health across sectors, and other levels of government
- strengthened capacity for cross-sector collaboration between providers of mental health care at the local level.

“ *The various elements of service provided to people with mental illness by organisations and services across sectors needs to be integrated.* ”

PRIORITY 5

Workforce, information, quality and safety

Enhance and strengthen the capacity of services to provide high quality, safe and evidence-based mental health care

Key actions

- Increase availability of a skilled mental health workforce
- Improve access to mental health service information, including information on consumer perceptions of care, to inform service evaluation and planning
- Improve delivery of safe, high quality care through effective quality improvement processes
- Increase access to evidence from research to inform mental health service delivery and development

The capacity to provide high quality services is essential to the delivery of a contemporary mental health care system, and relies on the use of evidence-based care to produce measurable improvements for consumers, carers and families. The quality agenda focuses on workforce development, information management, quality and safety initiatives, and research development. These are essential to the delivery of high quality care into the future.

Actions for 2007-11

An additional \$70.82 million will be provided over four years to expand and develop the mental health workforce to ensure the provision of high quality, safe public mental health services, and to continue developing mental health research and information management capacity. This funding includes \$43 million from the Queensland Government to replace Commonwealth funded projects expiring in 2007-08.

Workforce development

The Queensland Government will implement initiatives focused on developing workforce capacity to deliver mental health programs. This includes:

- \$2.41 million to develop and implement a range of strategies to recruit mental health staff. These include undergraduate marketing initiatives, targeted scholarships and incentives for people to enter the mental health workforce.
- \$3.06 million to provide a range of ongoing support to assist with retaining mental health staff. This includes orientation programs and supervision models for allied health and nursing.
- \$0.69 million to improve workplace culture and leadership, including programs to provide support to professional supervisors and team leaders.
- \$0.67 million to provide staff training and education through the Queensland Centre for Mental Health Learning including implementation of recovery training for mental health staff.
- \$0.46 million to provide support to develop the non-government sector workforce.
- Additional positions in the Queensland Centre for Mental Health Learning to improve risk assessment and management skills as part of the implementation of the recommendations from the Review of the *Mental Health Act 2000*.



- Enhancing the statewide role of the Queensland Centre for Mental Health Learning in the provision of mental health training initiatives for staff, consumers, family, and carers across public, private and community sectors.
- Developing a Workforce Development and Innovation Plan, which is consistent with the *National Practice Standards for the Mental Health Workforce*, including:
 - development of Clinical Practice Guidelines
 - development of standardised multidisciplinary training and education curriculum and modules based on the *National Practice Standards for the Mental Health Workforce*, for delivery by specialist educational units.
- \$16.4 million to establish the Consumer Integrated Mental Health Application (CIMHA), which will enhance access to clinical and service information needed to support service delivery and evaluation
- \$2.16 million to more effectively utilise information in clinical practice, service planning and policy development
- \$1.2 million to establish and maintain a data reporting repository
- developing and implementing strategies to improve access to mental health information
- implementing routine reporting of key performance indicators to guide service improvement activities and facilitate performance monitoring
- building infrastructure to enable the linking of mental health data sets at the client and service levels to better inform planning, funding, evaluation and development of models of best practice
- developing a health planning model for mental health based on prevalence and service utilisation data.

Information management

The Queensland Government will support the further development of Queensland Health information management systems to support quality mental health service delivery and reform. This includes:

“ *The quality agenda focuses on workforce development, information management, quality and safety initiatives, and research development* ”

Quality and safety

The Queensland Government will continue to develop and improve quality and safety systems in collaboration with consumers, carers and families, government and non-government service providers. This work will include:

- the development and implementation of a comprehensive Quality and Safety Plan which is aligned to *National Standards for Mental Health Services* and is consistent with the *National Safety Priorities in Mental Health: the National Plan for Reducing Harm*
- establishment of a system of clinical audit that engages services in ongoing review and quality improvement
- finalisation of implementation of the key recommendations in:
 - *Achieving Balance: Report of the Queensland Review of Fatal Mental Health Sentinel Events (2005)*
 - *Promoting balance in the forensic mental health system – Final Report – Review of the Queensland Mental Health Act 2000.*

Mental health research

The Queensland Government will continue to support mental health research and particularly, the application of research to clinical practice. This includes:

- \$0.77 million to develop a statewide framework for mental health research which supports the translation of evidence and innovation into improved day-to-day services for consumers, their families and carers
- collaborating with appropriate research bodies
- exploring increased funding for scholarships that promote the translation of evidence into practice.



Outcomes by 2011

Investment of funds to support workforce development and the provision of quality and safe mental health services will improve services for consumers, carers and their families. By 2011, the Queensland Government will have delivered the following outcomes:

- developed sustainable mechanisms to recruit and retain an adequate mental health workforce
- improved workforce development and support to ensure ongoing capability of mental health staff to deliver services
- developed and maintained effective leadership support for professional supervisors and operational leaders
- improved the use of information by clinicians and organisations in day-to-day clinical practice and service improvement initiatives
- developed and maintained the appropriate technology, infrastructure and resources to support mental health information management

- implemented and maintained effective quality and safety systems to ensure proactive identification of safety risks
- developed strategic links between the mental health workforce in public mental health services and the non-government sector workforce.

Outcomes by 2017

By 2017, the Queensland Government will have:

Workforce development

- developed and implemented a range of innovative recruitment and retention strategies for public mental health services
- developed and implemented new roles and new ways of using the skills and expertise of the mental health workforce
- engaged key stakeholders in mental health workforce planning and development.

EXHIBIT 208

**Information management**

- provided relevant and timely information to consumers, carers, mental health service providers and the community
- provided appropriate information and support to inform quality mental health service delivery and reform
- provided the technology, infrastructure, and resources that meet Queensland's mental health information needs
- established a quality and safety governance structure for mental health care across Queensland
- enhanced safety and minimised harm to consumers, the mental health workforce and the broader community
- engaged mental health stakeholders in quality and safety systems.

Research

- established statewide mechanisms to ensure that all key stakeholders contribute to, and benefit from mental health research.

7. Conclusion

The *Queensland Plan for Mental Health 2007-2017* sets a broad agenda to guide the reform and development of mental health services across the State, providing strategic and operational direction to mental health services. The Plan informs development, delivery and investment in mental health services.

It outlines a staged approach to reform and looks to the future as Queensland progresses towards a genuinely collaborative and supportive mental health system. Progressive implementation of the Plan will see Queensland establish a broader base for mental health intervention, while simultaneously moving towards a stronger focus on promotion and prevention, as well as establishing a consumer-driven, recovery-focused service delivery system.

Implementation of the *Queensland Plan for Mental Health 2007-2017* will be overseen by the Mental Health Interdepartmental Committee. The Director of Mental Health will be responsible for coordinating regular reporting that will be detailed in Queensland Health's Agency Service Delivery Statement, the annual Queensland Health Performance Report and a report to Cabinet.

An evaluation framework is being developed that considers progress towards identified goals and objectives at multiple levels:

- at the individual level in regard to the outcomes for consumers and carers, and the delivery and achievements of specific programs
- at the organisational and resource management level
- at the state level in regard to systems development, coordination and collaborative achievements
- within the National COAG evaluation framework.

This Plan will remain current for ten years. It will be reviewed and updated every two years. The benefits and outcomes of initial reforms will assist in shaping further mental health improvements in Queensland throughout this period.

“ *The Queensland Plan for Mental Health 2007-2017 sets a broad agenda to guide the reform and development of mental health services across the State.* ”



Feedback and contact details

We welcome your feedback on the *Queensland Plan for Mental Health 2007–2017*.

Please send feedback to mhb@health.qld.gov.au

or you can contact:

The Director
Mental Health Branch
Queensland Health
GPO Box 48
Brisbane Q 4001

Further copies of the *Queensland Plan for Mental Health 2007–2017* are available:

- electronically, on the Queensland Health internet site at www.health.qld.gov.au/mentalhealth
- printed copies available by telephoning 1800 989 451.

