

Productivity Commission

Draft Report of the Inquiry into Mental Health

Submission from the Government of South Australia

January 2020



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The South Australian Government is committed to improving the delivery of mental health services across the state and welcomes the opportunity to engage with the Productivity Commission on the findings and recommendations presented in the Draft Report of its Inquiry into Mental Health.

Introduction

On 31 October 2019, the Productivity Commission released the Draft Report of the Inquiry into Mental Health, containing 88 recommendations across five reform areas:

- Early help for people
- Improving peoples' experiences with mental healthcare
- Improving peoples' experience with services beyond the health system
- Increasing the participation of people with mental illness in education and work
- Reforming the funding and commissioning of services and supports

Within the South Australian context, the recommendations extend beyond the remit of the Department for Health and Wellbeing, impacting upon a variety of South Australian government agencies including the Department of the Premier and Cabinet, Department of Treasury and Finance, Attorney-General's Department, South Australian Housing Authority, Department for Education, the Department of Human Services, South Australia Police, the Department for Innovation and Skills and the Department for Correctional Services.

The South Australian Government, through this response, wishes to highlight the existing synergies between South Australian Government priorities and the draft recommendations, as well as to express areas where there may be potential risks and implementation requirements which the Productivity Commission may wish to consider as it enters the final stages of its Inquiry and in preparation of its final report.

South Australian context

Mental Health is a priority area of focus for the South Australian Government.

In 2017, the South Australian Mental Health Commission published the South Australian *Mental Health Strategic Plan 2017 – 2022*, setting a long term vision for improving mental health and wellbeing outcomes for South Australians. More recently, the *Mental Health Services Plan 2020-2025*, developed in partnership

by the Office of the Chief Psychiatrist and the SA Mental Health Commission, has been released with a focus on better outcomes for consumers, carers and staff.

Aspects of the *Mental Health Strategic Plan* that are consistent with the principles for reform in the Productivity Commission's Draft Report include but are not limited to:

- Promotion, community education and early-in-life intervention to strengthen mental health and wellbeing, prevent mental illness, raise awareness and reduce stigma.
- Integrated services that work better together, providing quality supports and services that are easily accessible and meet individual, family and carer needs and support the needs of our diverse communities.
- Improved governance of services which support mental health and wellbeing to ensure person-centred, recovery-focused and outcomes-oriented approaches to care.
- Measurement and monitoring of improvements in mental health and wellbeing outcomes.

The *Mental Health Services Plan* is built upon a body of evidence including, but not limited to, outcomes of community consultation, workforce modelling, population and funding modelling, the National Mental Health Service Planning Framework, information technology data systems, safety and quality systems and evidence based practice. It is also underpinned by a human rights-based approach that respects a person's civil, political, cultural, economic and social rights which can be upheld through access to health care, housing, education and work, among other measures and recognises the complex interplay with broader health and social needs for a person experiencing a mental illness or mental health concerns.

The *Mental Health Services Plan* sets out the proposed future direction for South Australian state government funded mental health services with the overall aim to rebalance the system towards community alternatives focussed on early intervention and prevention, reduced reliance upon emergency services and improved service accessibility, integration, and continuity across the continuum of care.

Importantly, the *Mental Health Services Plan* acknowledges that a person's mental health is not isolated from other factors of overall personal wellbeing and that a holistic approach is required. This includes a strong emphasis on partnering with, and empowering consumers, their carers and families in their health care.

The *Mental Health Services Plan* has the overarching goals of achieving personalised, integrated, safe and high quality care and establishes a roadmap for rebalancing the mental health system based on six key priorities:

- Community alternatives
- Human rights
- Peer workforce
- Effective suicide prevention
- Access to therapies
- Equity of access to services

Achieving these goals and priorities will require reshaping existing service provision and innovative ways of delivering more integrated and efficient mental health services across community, residential and inpatient care settings in order to improve outcomes.

In addition, the *Mental Health Services Plan* includes a distinct emphasis on supporting the most vulnerable and at risk cohorts of our population, with a particular focus on older persons' mental health.

South Australia acknowledges that in the past, some of our older people have been harmed and/or placed at risk in state care facilities as a result of inadequate and unsafe care and treatment, which resulted in the review of Oakden Older Person's Mental Health Service and its subsequent closure.

The South Australian Government accepted each of the six recommendations of the Oakden Report and established an Oakden Response Plan Oversight Committee to provide oversight to SA Health in implementing the recommendations. The recommendations related to Model of Care, staffing, quality and safety of care, culture and restrictive practices.

Significant progress and improvements have already been made, including commissioning Northgate House and planning for the development of a state-wide Neuro-behavioural Unit. Further implementation of identified recommendations is an ongoing focus for South Australia.

The State Government's commitment to improving access to and the delivery of mental health services is further illustrated by its combined approximate \$100 million investment with the Commonwealth towards new initiatives and services for South Australia.

New initiatives and the associated funding allocation include:

- Statewide Borderline Personality Disorder Service (\$10 million over four years from 2018-19)
- Statewide Paediatric Eating Disorders Service (\$3.345 million over four years from 2018-19)
- "Tier 7" Dementia Unit for Older Persons based at the Repatriation Health Precinct (\$35.756 million over four years from 2019-20)
- Rapid Access Older Persons Team for in-reach to Residential Aged Care Facilities (\$6.229 million over four years from 2019-20)
- Expanded forensic mental health beds (\$20.350 million over four years from 2019-20)
- Expanded forensic capacity (fixated persons) (\$3.098 million over four years from 2019-20)
- Forensic Court Diversion Service (\$0.804 million for 2019-20)
- Urgent Mental Health Care Centre (estimated at \$14.8 million over four years from 2019-20)
- Eating Disorders Centre based at the Repatriation Health Precinct (\$5 million operating grant to the Mental Health Breakthrough Foundation)

- Commencement of the Way Back suicide prevention initiative (\$1.046 million over three years); and
- Towards Zero Suicide Strategy (\$0.918 million over three years).

Safety and Quality activities related to Trauma Informed Care and Expansion of evidence based therapies will also commence within existing budgets.

Reflections on the Draft Report

The Draft Report sets out a long term reform agenda for mental health and wellbeing services with short, medium and longer term actions identified, supporting a staged implementation of change for the sector.

The scope of reform expands across multiple levels of government and agencies, delving into areas that require a national coordinated approach as well as areas that are the responsibility of state government.

Many of the principles for reform reflected in the Draft Report recommendations are consistent with the objectives of the South Australian Government's investment in new initiatives and services, and the goals and priorities of the state *Mental Health Services Plan* and *Mental Health Strategic Plan*. This is particularly clear for the reform areas of *early help for people* and *improving peoples' experiences with mental healthcare*.

South Australia notes that there is limited consideration of older person's mental health in the Draft Report. Implementation of the Oakden Response Plan may provide important learnings which could be reviewed by the Productivity Commission. This is of particular importance in the context of the Royal Commission into Aged Care Quality and Safety and the recommendations of its Interim Report, *Neglect*. Older persons' mental health services need to be well placed to support older people at home, and in residential aged care with a mix of community, aged care in-reach and residential services.

South Australia recognises the need for existing and new health services to provide family focused and carer inclusive practices.

The Productivity Commission's proposals around governance of the mental health system, and supports beyond health are considered in more detail below.

Funding and Commissioning

The South Australian Government considers there is opportunity to clarify roles and responsibilities in funding and commissioning mental health services as articulated within the *reforming the funding and commissioning of services and supports* reform area.

There are a variety of parties engaged in commissioning and providing mental health services, including the Commonwealth Government, the State Government, private providers and community health services. Collaboration and coordination across these parties is critical to ensure the seamless provision of the right services, in the right place, at the right time.

As identified in the Draft Report, there are a number of steps which could be taken to improve collaboration and coordination.

South Australia notes the Productivity Commission's proposal for greater alignment of discussions on joint planning and commissioning within the current setting. This proposal is consistent with broader discussions and initiatives already underway across jurisdictions for joint planning and commissioning across a range of services in the health service continuum. South Australia welcomes additional measures to improve cooperative arrangements between governments and service providers to ensure improved health outcomes.

The Productivity Commission's proposed 'rebuild', model contains limited detail and further analysis is required of its merits. As the Productivity Commission has identified, the needs of people with mental illness must be addressed holistically and may require a range of services. The creation of a separate entity to oversee planning and funding arrangements for mental health services while providing for regional commissioning across a range of mental health services may create fragmentation with other parts of the system, particularly in interfaces with acute, aged care and disability services that may also be accessed by mental health clients.

The final recommendations of the Productivity Commission should carefully consider which option most effectively integrates mental health services, not only across the mental health space but also the broader health and social services systems, and minimises unintended consequences for consumers and other parties involved in this space.

Supports beyond Health

As the Productivity Commission has outlined, individuals with mental illness may need additional care and support to have fulfilling lives. The reform areas *improving peoples' experiences beyond the health system*, *increasing the participation of people with mental illness in education and work* and *early help for people* highlight that this support goes well beyond the health system.

While the Draft Report identifies potential reform activities for areas within the Commonwealth Government's remit, critical areas such as housing, education, and justice are primarily state government responsibilities. Any recommendations of the Productivity Commission will need to be considered in terms of the existing state-based priorities and approaches.

Housing

As at 31 October 2019, 14 per cent of South Australia's public housing had tenants identified as having a mental health related disability at the time of allocation. However, the number of people across South Australia's social housing system with poor mental health is likely to exceed this figure, giving consideration to people who did not self-identify, and if other household members or community housing occupants are considered.

An integrated approach to service delivery across the mental health, health and social services sectors has also been recognised as critical to success within in the

state Mental Health Services Plan, identifying that commissioned services will be expected to interface with homelessness networks and housing providers supported by memorandums and other agreements.

South Australia has a number of short, medium and long term housing programs that specifically address the housing needs of those with a mental health condition. The State Government works collaboratively with a range of government and non-government providers to address the needs of vulnerable clients, in particular those with mental illness who are sleeping rough. Examples of programs include:

- Coordinated Care and Integrated Housing Program – a collaborative, immediate response to improve the health and wellbeing of people sleeping rough, with a focus on safety and rapid housing.
- Integrated Homelessness Project - provides access to housing and support to achieve sustainable housing outcomes for people with a high level of vulnerability, with priority access given to those with mental illness.
- Mental Health Supported Social Housing Program - up to 250 social housing properties have been made available since 2014 to clients of mental health services.
- Specialist Disability Accommodation – 31 properties set aside for people with a psychosocial disability exiting institutional care.
- Avalon Program – a joint community housing and mental health program providing intensive housing support and transition to longer term housing.

While the above examples are not exhaustive, they demonstrate the commitment to support people experiencing mental illness with sustainable and supportive social housing.

The South Australian Government notes that the Productivity Commission is concerned with increasing the capacity of housing services to support people with mental illness to find and maintain stable housing.

South Australia has recently implemented a number of policy reforms, including the Temporary Absences Policy which allows tenants to be absent from their property for up to three months, with an option to extend for a further three months, given special circumstances such as hospitalisation. Social housing staff work closely with mental health care coordinators where required to determine the most appropriate response to a vacant property. There is also an Antisocial Behaviour Policy which aims to achieve a better balance between the rights of tenants and those of the neighbouring community.

The South Australian Government funds external services to support private renters who are at risk of losing their tenancy, including those who are experiencing mental health issues.

Future action will be guided by the new housing and homelessness strategy for South Australia, *Our Housing Future 2020-2030*. Initiatives under *Our Housing Future* will include developing targeted responses for people who repeatedly cycle through the system, which is expected to produce significant outcomes in South Australia's homelessness system. Essential to success will be support from wrap-

around services from intersecting sectors, particularly by those agencies external to the housing portfolio.

The South Australian Government is committed to continuous review of the impacts of its policies and programs, and balancing the needs of social and private housing and the broader community.

Education

South Australia has policies and practices in place that support and enhance the social and emotional development of preschool and school-aged children. This includes application of national models such as the Early Years Learning Framework and the National Quality Standard.

The Department for Education administers the Wellbeing and Engagement Collection (WEC) survey for students in years 4 to 12. The survey asks young people about how they think and feel about their experiences, both inside and outside of school. It includes questions on development areas linked to wellbeing, health and academic achievement. In 2019, over 96,000 students participated in 520 South Australian government and non-government schools.

The Department for Education supports national data collection projects such as the Australian Early Development Census and the Longitudinal Study of Australian Children, and works closely with the BeYou initiative, which provides an evidence-based directory for a range of mental health and wellbeing programs.

South Australia would support the work of the COAG Education Council to develop a national strategic policy if this recommendation was formalised in the Productivity Commission's final report. The development of a national policy should be considered in light of the Australian Curriculum and the Australian Professional Standards for Teachers, and existing commitments and levers that support social and emotional wellbeing, such as the *South Australian Keeping Safe: Child Protection Curriculum*.

At the local level, schools implement a range of programs relevant to their school context, using data to determine the learning and wellbeing outcomes of these programs.

Specific State Government initiatives aligned to the draft recommendations include:

- Screenings provided by SA Health for preschool aged children in preschool settings or at Child and Family Health Services clinics where social and emotional development can be assessed.
- Substantial investment to provide every government school in South Australia with resourcing to employ student wellbeing leaders to support students and facilitate referral pathways to mental health providers.
- The Inclusive Education Support Program, which enables allocation of resourcing to preschools and schools based on needs, including complex social/emotional needs.
- Social workers within the Department for Education working across metropolitan, regional and rural areas to promote attendance and engagement, including for children and young people with mental health needs.

In relation to preschools, the South Australian Department for Education supports professional learning for employee staff on accredited children's social and emotional development, where the need is demonstrated through site and community level context.

It is not currently routine practice across all jurisdictions to provide accreditation of teacher professional learning. If the proposal to accredit external social and emotional learning programs is formalised as a recommendation, it should be noted this would not fit within the remit of the agencies currently responsible for education. Additional considerations and risks would need to be balanced if additional regulation and compliance expectations are created for teachers and education systems.

Justice

In South Australia, a Mental Health Memorandum of Understanding exists between South Australia Police, the SA Ambulance Service, the Royal Flying Doctor Service and SA Health. This clearly defines the roles and responsibilities of service providers when responding to mental health related incidents.

Work to embed mental health professionals in police communication centres and establish appropriate co-response models in line with the Memorandum of Understanding is being progressed.

South Australia also has a range of strategies to ensure the rights of people with mental illness are protected and promoted in their interactions with the justice system. These include:

- The *Statute Amendment (Vulnerable Witnesses) Act 2015*, which includes provisions for communication assistants, alternative measures for evidence to be presented in court, enhanced supports, evidence-taking in informal surroundings and priority listings where appropriate.
- Development of a new service model where a particular class of persons (such as speech pathologists, psychologists and occupational therapists) can serve as communication partners to people with complex communication needs. Details are expected to be finalised in the first half of 2020
- Joint funding (with the Commonwealth Government) for legal assistance to those people who cannot afford to pay for private legal representation, including priority clients such as people living with a disability or mental illness.

South Australia has specific measures for legal aid services to assist people appearing before mental health tribunals and other tribunals that hear matters arising from mental health legislation. In South Australia, relevant decisions under the *Mental Health Act 2009 (SA)* are reviewable by the South Australian Civil and Administrative Tribunal, and specific funding is provided to the South Australian Legal Services Commission for legal representation of protected persons in such reviews and subsequent appeals.

There are also a number of bodies in South Australia that may provide non-legal individual advocacy services for individuals subject to involuntary treatment under mental health legislation. For example, the Public Advocate has powers to provide

individual and systemic advocacy in respect of the needs of mentally incapacitated persons.

People in custody should receive the community equivalent standards and access to mental health treatment and support. This includes assessment, treatment (acute, sub-acute and rehabilitation) and discharge planning from custodial settings to the community.

The implementation of a screening process in custodial settings will provide a clearer understanding of the care requirements, and enable a targeted approach to care and support for prisoners/offenders with a mental health issue requiring intervention. Improved engagement will also provide more informed discharge planning pathways ensuring effective links back into the community for continuity of care on release.

South Australia acknowledges the importance of early and continued identification of people at higher risk of mental illness at each stage of the justice system and supports the development of mental health service standards in correctional facilities.

Currently, all forensic mental health in-reach services to correctional facilities are provided through SA Health. As identified in the state *Mental Health Services Plan* there is an intention for in-reach services to be expanded in the short, medium and longer term (subject to funding prioritisation).

The Department for Correctional Services delivers a state-wide Aboriginal Services Unit and site based Aboriginal Liaison Officers across South Australia's nine prison sites, providing cultural advice and direct support for Aboriginal offenders.

Conclusion

The Productivity Commission's Draft Report provides a solid foundation to build better integrated services, identifying opportunities for better coordination and clarity around roles and responsibilities in this sector. However, the Productivity Commission's final report must be cognisant of the significant concurrent work and reviews relating to Australia's mental health system underway at present. This includes the *National Suicide Prevention Strategy* under development by Health Ministers, implementation of the *Fifth National Mental Health Plan*, the Victorian Royal Commission into Mental Health and work of the National Suicide Prevention Adviser.

Many of the themes coming out of this work are consistent, and there is a significant opportunity with the focus of government's and nation-wide momentum to make some positive and lasting changes in this area.