VTPHNA additional submission to the Draft Report of the Productivity Commission into Mental Health and update on the Victorian Place-Based Suicide Prevention trials
March 2020
The Victorian and Tasmanian PHN Alliance and the Productivity Commission into Mental Health

The Victorian and Tasmanian PHN Alliance (Alliance) once again acknowledges the importance of the Productivity Commission inquiry into Mental Health (Commission), a national inquiry on the social and economic benefits of improving mental health.

This paper provides specific feedback to the Commission’s Draft Report released 31 October 2019 in relation to the role of Primary Health Networks (PHNs) in supporting people’s ability to participate and thrive in the community and workplace, highlighting ongoing initiatives in Victoria. In particular, it highlights the necessity for place-based approaches.

The Commission’s inquiry coincides with the Royal Commission into Victoria’s Mental Health System (RCVMHS) which represents an opportunity to implement much-needed transformational change in the mental health landscape of Victoria.

Update on the Victorian Place-Based Suicide Prevention Trials

The Victorian Government and Primary Health Networks have partnered to support local communities to develop and implement coordinated place-based approaches to suicide prevention.

The agreement between the Department of Health and Human Services (DHHS) and the six Victorian PHNs resulted in an aligned funding model that implemented the Placed Based Suicide Prevention trials (PBSPT) in 12 metropolitan, regional, and rural locations of need over a four-year period (2017-2020). Both parties are in the process of extending the trials for two more years to facilitate transition to more permanent community-based models in 2021-2022.

The place-based approach brings together different parts of the community, including people with lived experience of suicide, community agencies, the Aboriginal Community Controlled sector, schools, businesses, local council, transport, police, health services, ambulance and others to identify what is needed to prevent suicide and find solutions that will work for the local community.

The focus of the place-based trials is on strength, hope and help-seeking behaviour to promote good mental health and positive social and emotional wellbeing. This is a new way of working together to prevent suicide that requires strong collaborations across many sectors within a community. The collective efforts are guided by a robust statewide operating model, evaluation approach and other relevant frameworks.

The place-based trials seek a positive impact on rates of suicide and attempts, individual resilience and wellbeing, and broader system improvements.
The value of using a place-based approach

A place-based approach recognises that people and places are inter-related, and that the places where people live and spend their time affects their health and wellbeing. The focus is on local needs and local priorities, engages the community as an active partner in developing solutions, and maximises value by leveraging multiple networks, investments and activities to deliver the best outcomes for communities.

Place based approaches respond to complex, interrelated or challenging issues, including social issues impacting those experiencing, or at risk of, disadvantage, or for natural disasters such as bushfire and drought.

Place-based approaches focus on prevention not just intervention. It generates collective and collaborative action, active engagement, and partnership with communities so that all stakeholders see themselves as active participants.

A place-based approach can be considered ‘person centered’ because it recognises the impact of ‘place’ on individuals’ experiences and outcomes and incorporates this recognition into strategies to improve social, economic and environmental outcomes.

Devolved decision making and place-based approach

The Draft Report of the Productivity Commission into Mental highlighted the tension between centralised versus devolved decision making and concluded that devolved mental health decision making and purchasing activities to the regional level is often desirable.

Devolving decision making acknowledges regional variations in population density, socioeconomics and culture and subsequent variation in needs.

Devolving decision is a validation that local people and agencies are generally better placed to take local context into account as they have more or better information and can leverage existing social and cultural relationships.

Local stakeholders supported by the Primary Health Networks and Local Hospital Networks (LHNs), can collaboratively commission place-based approaches to improve service access, quality and equity.

Governments and commissioning bodies can learn from place-based approaches that are already underway such as the Victorian Place Based Suicide Prevention Trials, by potentially embedding meaningful public and multi-stakeholder participation into the business of policy development and service delivery.
About the Victorian and Tasmanian PHN Alliance

The Victorian and Tasmanian PHN Alliance (Alliance) provides a platform for the Tasmanian and six Victorian Primary Health Networks (PHNs) to work together. The Alliance enables the PHNs to collectively achieve the best possible outcomes for local communities and organisations through leadership, collaboration, coordination and synergy across the jurisdictions.

The Alliance has a significant interest in mental health reform and system transformation given the dual role of Primary Health Networks (PHNs):

- as Commissioners, PHNs have a role in developing and shaping primary healthcare services to deliver evidence-based models of care across a geographical area; and
- as Improvement Partners, PHNs have an active role in supporting the clinical and non-clinical workforce to build individual skills and expertise, and to implement systems of care.

This dual role offers a unique contribution to system capacity that strives to advance safety and quality within primary healthcare.

The Alliance proudly acknowledges Australia’s Aboriginal and Torres Strait Islander community and their rich culture and pays respect to their Elders past and present. We acknowledge Aboriginal and Torres Strait Islander peoples as Australia’s first peoples and as the Traditional Owners and custodians of the land and water on which we rely. We recognise and value the ongoing contribution of Aboriginal and Torres Strait Islander people and communities to Australian life and how this enriches us. We embrace the spirit of reconciliation, working towards the equality of outcomes and ensuring an equal voice.

The Victorian and Tasmanian PHN Alliance also acknowledge all people who have personal experience of mental illness and their families and carers. The voice of people with lived experience is essential in the development of our work.

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