

# Tasmanian Government Submission

PRODUCTIVITY COMMISSION INQUIRY INTO THE  
SOCIAL AND ECONOMIC BENEFITS OF IMPROVING  
MENTAL HEALTH

April 2019

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# I. INTRODUCTION

The Tasmanian Government welcomes the opportunity to make a submission to the Productivity Commission's inquiry into the economic and social benefits of improving mental health.

Tasmania's mental health system is complex and involves many stakeholders including people living with mental illness, their families and carers, the Tasmanian Government, the Australian Government, public sector agencies, the private sector and community-managed organisations. It also overlaps with many services and sectors such as alcohol and drug services, acute services, emergency services, disability services, children and youth services, housing, justice, education and employment providers.

Across the Tasmanian State Service there is broad recognition of the importance of good mental health. Accordingly, a range of programs and supports are in place to promote positive mental health, and to support those with mental ill-health. Existing programs and supports cut across the mental health system, the education system, the justice system and in housing and social services.

While this submission reflects on a number of important and effective initiatives that are being implemented, the Tasmanian Government recognises the importance of continuous improvement.

## 2. CONTEXT

The Tasmanian Government is committed to developing an integrated Tasmanian mental health system that provides support in the right place, at the right time and with clear signposts about where and how to get help. One of the key aims of these reforms is to shift the focus of the Tasmanian mental health system from hospital-based care to support in the community. To do this effectively requires collaboration across levels of government and across service settings.

Like acute health services more broadly, funding for mental health services in Tasmania is provided through both the Tasmanian and Australian Governments. Services are delivered in a range of settings, from primary and community care through to acute care.

### *2.1 Tasmanian Government funded services*

The Tasmanian Government provides funding for public sector mental health services and sets legislative, regulatory and policy frameworks for mental health service delivery.

Public sector mental health services provide specialised care for people with mental illness. These include admitted patient services delivered in hospitals and services delivered in community settings.

The Royal Hobart Hospital (RHH) masterplan is an immediate and long-term framework to guide health services and includes a commitment to a dedicated sub-acute and mental health campus of the RHH in stage three of the redevelopment.

Public mental health services are provided across Tasmania through the Tasmanian Health Service (THS). Services include:

- 24 hour acute care units located at three public hospitals in the North, North-West and South;
- a 24 hour older persons acute unit located in the South providing services to people across the State (Roy Fagan Centre);
- a 24 Hour Step up/Step Down facility located in the South;
- 24 hour specialist extended treatment units located in the south and providing services to people across the State;
- child and adolescent, older persons and adult community teams that operate across the State;
- adult community mental health teams provide crisis assessment treatment and triage services;
- a 24/7 statewide helpline triage service – the Mental Health Services Helpline; and
- Forensic Mental Health Services providing community and inpatient care for people with a mental health disorder, who are involved with (or at risk of involvement with) the justice system.

The Government has also announced the establishment of a Mental Health Hospital in the Home service from March 2019. This new 12-bed equivalent service will operate in Southern Tasmania and employ around 15 staff across a range of professions.

The service will treat people in an acute phase of mental illness, who are assessed as being able to be treated in their own home. It will provide intensive hospital level treatment and will operate with extended hours, seven days a week.

The Tasmanian Government also provides funding to community-managed organisations for a range of activities including:

- psychosocial support services;
- individual packages of care;
- residential rehabilitation;
- community based recovery and rehabilitation;
- peer support groups;
- advocacy and peak body representation for consumers, carers and service providers; and
- prevention and brief intervention services.

## ***2.2 Australian Government funded services***

The Australian Government provides Medicare and grant-based funding and policy direction for the delivery of primary mental health care services delivered by private psychiatrists in the community, general practitioners, private psychologists, mental health nurses and other allied health professionals, as well as providing core funding to Aboriginal Community Controlled Health Services. It is also a funder of services delivered by the community-managed sector, both directly and through grants administered by Primary Health Networks (PHNs).

The Australian Government also has a central role in the infrastructure of the mental health system through funding research, telephone-based and digital service delivery initiatives, workforce initiatives in the tertiary education sector, Pharmaceutical Benefits Scheme (PBS) subsidised medicines and interfaces with key portfolio areas such as the Australian Government Department of Social Services.

### **2.3 Community-managed sector**

In Tasmania, the community-managed sector generally operates on a not-for-profit basis and is funded by both the Tasmanian and Australian Governments. The Tasmanian Government provides funding to a number of service organisations including Richmond Fellowship Tasmania, Rural Alive and Well, and the Butterfly Foundation, as well as peak advocacy bodies such as the Mental Health Council of Tasmania, Flourish, and Mental Health Carers Tasmania. The sector includes both large and small organisations, some with statewide coverage, and some that operate in only one locality. These services often have strong connections with local communities and can engage those communities to deliver better social outcomes for consumers and carers.

### **2.4 Private health sector**

The private health sector provides professional fee-based services in both inpatient and office-based settings. These services can include primary care, acute case management, rehabilitation, psychological interventions and other allied health based supports. Private sector professionals and organisations are substantial contributors to overall service delivery in mental health, and their funding is provided by a mix of patient fees and Australian Government rebates.

## **3. CURRENT PROGRAMS AND SUPPORTS IN TASMANIA**

### **3.1 Rethink Mental Health Plan 2015-25**

*Rethink Mental Health: Better Mental Health and Wellbeing – A Long-Term Plan for Mental Health in Tasmania 2015-2025* (Rethink) sets a vision for Tasmania to be a community where all people have the best possible mental health and wellbeing.

Rethink supports delivery of the Government's commitment to developing an integrated mental health system that provides support in the right place, at the right time and with clear signposts about where and how to get help.

Rethink includes short, medium and long-term actions to achieve this vision and identifies ten reform directions:

- empowering Tasmanians to maximise their mental health and wellbeing;
- a greater emphasis on promotion of positive mental health, prevention of mental health problems and early intervention;
- reducing stigma;

- an integrated Tasmanian mental health system;
- shifting the focus from hospital-based care to support in the community;
- getting in early and improving timely access to support (early in life and early in illness);
- responding to the needs of specific population groups;
- improving quality and safety;
- supporting and developing our workforce; and
- monitoring and evaluating our action to improve mental health and wellbeing.

### **3.2 *Tasmanian Suicide Prevention Strategy***

Tasmania's suicide prevention policy framework is outlined in a suite of three companion documents that when read together outline the Government's approach.

1. The *Tasmanian Suicide Prevention Strategy (2016-2020)* recognises the specific knowledge, services and resources that exist in Tasmania and that we need to work together to reduce suicide, suicidal behaviour and the impact on Tasmanians.
2. The *Youth Suicide Prevention Plan for Tasmania (2016-2020)* takes an evidence-based approach to taking action to reduce youth suicide, suicidal behaviour and the impact upon young people in Tasmania.
3. The goal of the *Suicide Prevention Workforce Development and Training Plan for Tasmania (2016-2020)* is to support priority workforces to provide effective and compassionate care and support to people experiencing suicidal thoughts and behaviours.

Tasmania's Chief Psychiatrist works closely with the Mental Health, Alcohol and Drug Directorate on suicide policy in Tasmania and is the Chair of the Tasmanian Suicide Prevention Committee. The Chief Psychiatrist also provides advice regarding the evidence for suicide prevention strategies and in the implementation of the Tasmanian Government's suicide prevention policy framework.

### **3.3 *Connecting with People***

*Connecting with People* (CwP) training is currently being implemented across a range of business units within the Department of Health. CwP is an excellent example of a program that is designed to build the capacity of workplaces to respond more appropriately to mental health issues.

CwP is an internationally recognised, evidence-based suicide and self-harm mitigation and prevention training program developed by 4 Mental Health Ltd (4MH) in the United Kingdom (UK) in 2010. The program aims to "reduce stigma, increase understanding and compassion regarding self-harm and suicidal thoughts".

The program comprises a Suicide Mitigation Program and a Self-Harm Mitigation Program. The Suicide Mitigation Program is designed for health and social care practitioners with a comprehensive approach to improving the consistency and documentation of their assessment of patients at risk of suicide. Self-Harm Mitigation is designed for health and social care practitioners, educationalists, voluntary services, community members and people with lived and living experience of self-harm - and their carers - with a comprehensive and peer reviewed approach to improving compassion and understanding, reducing stigma and improving the consistency of response to someone who engages in self-harm.

### 3.4 Mental health integration taskforce

In 2018, Tasmania's Chief Psychiatrist convened an expert taskforce to provide advice on improving integration of mental health services in Southern Tasmania. The group is providing expert advice on how we best deliver services across the spectrum of mental health care – including community facilities, in-patient units, and the Emergency Department – to ensure that Tasmanians get the right care, at the right place, at the right time.

In undertaking its work, the Taskforce has been made aware of innovative and effective models operating in the Trieste region in Italy and in the Floresco Centre in Queensland.

- **Trieste in Italy**

The mental health service system in the Trieste region of Italy is an example of an effective community-based system that provides full clinical and psychosocial support.

The services are provided by multi-disciplinary teams of mental health workers at each of the four community-based mental health centres (MHC), and are closely linked with housing, employment and social reintegration provision for minimising psychiatric disability. Clinical support is available 24 hours a day, seven days a week.

The Trieste system is underpinned by principles such as the importance of belonging to a community and participating in society for recovery; treating people with respect and dignity to be partners with health professionals in the progress of their recovery; and participating in work as an instrument for recovery and reducing stigmatisation.

A number of indicators show the effectiveness of the Trieste service model, including: Trieste has an average of seven per 100,000 residents subject to involuntary treatment compared with 30 per 100,000 Italy-wide; no one with mental illness is homeless in the region; and suicide rates have decreased by 30 per cent over the last eight years.

- **Floresco Centre in Queensland**

The Floresco Centre<sup>1</sup> in Queensland is an example of an innovative approach to improve integration between multiple providers of clinical and non-clinical mental health and related services.

The centre co-locates a range of services in one physical location, including services relating to community support, housing, and employment as well as clinical services; has one intake/assessment/triage process; uses one client information management system; and has an agreed set of routine outcomes/measures.

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<sup>1</sup> <https://www.qmhc.qld.gov.au/research-review/better-service-integration/floresco-service-model>

An evaluation of the Floresco Centre was conducted by the University of Queensland<sup>2</sup> over a three year period, with a report released in June 2018. The evaluation showed there were a number of challenges to providing an integrated model of care, but also demonstrated key success factors and showed the integrated service model appears to have contributed to positive mental health outcomes for clients who have significant mental health and functional difficulties.

### **3.5 Child and Youth Wellbeing Framework and Outcomes Framework**

The Tasmanian Child and Youth Wellbeing Framework was released in 2018. The Framework defines wellbeing across six domains, including health and participation. The primary aim of the framework is to ensure that everyone, in all parts of Tasmania's service system and in the broader community, has a strong, common understanding of child and youth wellbeing. This common understanding will help to facilitate a whole-of-community focus on ensuring that Tasmanian children and young people are loved and safe, have access to material basics, have their physical, mental and emotional health needs met, are learning and participating, and have a positive sense of culture and identity.

An Outcomes Framework to measure progress against the Child and Youth Wellbeing Framework is anticipated for release in 2019, which will measure the overall success of efforts to improve child and youth wellbeing in Tasmania.

### **3.6 Child and Student Wellbeing Strategy 2018-21**

The Tasmanian Department of Education has in place a *Child and Student Wellbeing Strategy 2018-21* (Wellbeing Strategy) to support young people to engage in learning.

Children and young people spend significant time at school, and schools are well placed to identify and intervene early when there are risks to a child's wellbeing. Schools and other learning environments are ideal universal platforms to deliver prevention and early intervention, and childhood and youth are the periods when these programs can have the most impact.

The goal of the Wellbeing Strategy is to ensure that learners are safe, feel supported and are able to flourish, so they can engage in learning. The Wellbeing Strategy defines child and student wellbeing as a state where learners feel loved and safe; have access to material basics; have their physical, mental and emotional needs met; are learning and participating; and have a positive sense of culture and identity.

As part of the implementation of the Wellbeing Strategy, the Department of Education will collect data on student wellbeing, and link the wellbeing data to learning outcomes. Data will guide decisions regarding allocation of resources to those areas of child and student wellbeing that are strongly correlated to improved learning outcomes.

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<sup>2</sup> Floresco Centre service model evaluation, June 2018, <https://www.qmhc.qld.gov.au/research-review/better-service-integration/floresco-service-model>

Collecting wellbeing data in the student voice will enable the Tasmanian Department of Education to:

- embed system level measures of wellbeing linked to improved learning outcomes, for example, demonstrated through National Assessment Program – Literacy and Numeracy results;
- determine the allocation of existing resources;
- target funding for additional support or learning programs; and
- provide evidence of system and school improvement, and to guide priorities, plans and goals in schools;

Benefits to this data collection include:

- informing cross-agency and community efforts to help improve young people's health and wellbeing;
- advocating for children's wellbeing; and
- targeted support for programs and services required for children and families.

Work is progressing on the development and delivery of a student wellbeing survey. The survey will gather data that will be used to underpin targeted interventions to support student wellbeing and improve learning outcomes.

### ***3.7 Professional supports for school students***

Tasmanian Government schools employ the services of professional staff who work with students and teachers to support the emotional wellbeing and overall development of students.

- **Support teachers** – are skilled teachers who support the school and classroom teacher to improve outcomes for students with disability and/or additional needs.
- **School psychologists** – are registered psychologists. They work with students, staff and parents towards the best outcomes for students' educational achievement and personal wellbeing through assessments, counselling and case management.

They offer support for concerns such as under-achievement, poor social coping skills, anxiety, depression, grief and loss and trauma impact.

- **Speech and language pathologists** – are qualified and skilled in assessing, diagnosing and treating speech, language and feeding disorders and difficulties. They work with students, parents, teachers and support staff to assist students with communication and feeding difficulties, including those with developmental delays or disabilities.
- **Social workers** – are professional practitioners who provide confidential counselling and support to students and their families around a range of issues. These may include relationships, mental health difficulties, stress management, attendance issues, grief counselling and conflict resolution. They provide assistance for families/students at risk of harm (from self or from others) such as suicide, self-harm, child protection issues or risk of homelessness. Social work services can be accessed directly by families or students, or through a referral from school staff.
- **School chaplains** – support the emotional wellbeing of students by providing pastoral care services and strategies that support the emotional wellbeing of the broader school community.

### **3.8 Professional care in rural and remote areas**

While Tasmanian Government Schools are undertaking a number of strategies and actions to support students' mental health and wellbeing, there are cases that require support from third party providers, for example, paediatric psychologists and specialist mental health care professionals and organisations. These services tend to be located in high-density population centres, and there are less services in rural and remote areas of Tasmania where the majority of Tasmanian Government Schools are located. Access to these services is impacted by distance, transport, accommodation and income. It should be noted that rural and remote communities are often more exposed to risk factors for mental health.

The Principal Wellbeing Action Plan 2019-21<sup>3</sup> includes commitments that will assist in increasing access to services in remote areas, such as:

- improving the recruitment, retention and allocation of professional support staff; and
- exploring a systemic approach to supporting students impacted by trauma and students with emotional and behavioural challenges.

### **3.9 School Health Nurses**

In response to feedback from schools and the Tasmanian Association for State School Organisations, \$4 million has been allocated over four years to extend the School Health Nurses initiative to Government District Schools with a focus on school-wide health promotion, prevention, and early detection for students aged from Kindergarten to Year 12.

This initiative has delivered a further 7.7 Full Time Equivalent (FTE) nurses with a staged rollout in October 2017, November 2017 and January 2018. The total staffing for the School Health Nurse initiative has increased to 29.7 nurses, including two managers (1 FTE).

The successful contemporary model of school nursing recognises the link between health and education and provides early intervention, detection and health promotion/ education.

Secondary school nurses also provide drop-in clinics to students in order to empower them to take responsibility for their own health needs, which helps facilitate the transition from adolescence to adulthood. School health nurses work and liaise collaboratively with other support service staff, including school psychologists, speech pathologists, social workers, vision and deaf services, autism consultants and physical impairment co-ordinators.

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<sup>3</sup> <https://documentcentre.education.tas.gov.au/Documents/Principal-Wellbeing-Action-Plan-2019-2021.pdf>

### **3.10 Social participation policy, advice and strategy**

The importance of social participation and inclusion is recognised in whole-of-government strategies and advisory mechanisms. For example, the Tasmanian Government is currently implementing the:

- *Safe Home, Safe Families: Tasmania's Family Violence Action Plan 2015-2020*;
- *The Tasmanian Disability Framework for Action*;
- *The Tasmanian Carer Action Plan*;
- *Strong Liveable Communities – Tasmania's Active Aging Plan 2017-2022*; and
- *The Tasmanian Women's Strategy*.

Resources have also been allocated towards developing a refreshed Elder Abuse Strategy, and a whole-of-government cross-cultural bullying strategy.

The establishment of government advisory groups recognises the importance of lived experience and the consumer voice in policy development and service planning. Tasmanian Government advisory groups include the Tasmanian Women's Council, the Premier's Disability Advisory Council, the LGBTI Reference Group, the Multicultural Policy Review Advisory Committee and the Veterans' Reference Group.

People with a lived experience of mental illness are central to effectively tackling stigma and discrimination. Providing effective role models and using peer-based interventions can be helpful in improving a person's capacity to respond to stigma and discrimination. Peer workforce models have been examined as a priority action under Rethink Mental Health, Tasmania's reform agenda for mental health (further information on this initiative is provided at 3.5).

It is worth highlighting in particular the Premier's Health and Wellbeing Advisory Council which provides advice on cross-sector and collaborative approaches to improving the health and wellbeing of Tasmanians. The Council's vision is for Tasmania to be the healthiest population by 2025 and the Council contributes to the Government's Healthy Tasmania Five Year Strategic Plan.

### **3.11 Grants and funding support**

Grant programs are in place to meet the community, sport and recreation needs of Tasmanians. The Tasmanian Government's 2018-19 budget includes:

- \$6.178 million in regional and community election commitments to sport and recreation clubs and organisations;
- \$3 million for Ticket to Play, with sports vouchers worth up to \$100 towards the cost of club membership being made available to Tasmanians aged between five and 17 whose parent or guardian hold a Centrelink Health Care Card or Pensioner Concession Card, and those in Out of Home Care. Children and young people can choose from a range of sports and activities, including scouts, surf life-saving, cricket, athletics, equestrian and football;
- \$10 million over the next two financial years to Levelling the Playing Field to provide change rooms and facilities for women and girls to boost female sports participation;
- Distributing funding to a range of sports including basketball, cricket, netball and surf life-saving to increase their capacity to provide opportunities for Tasmanians to participate;

- Extending funding of \$150,000 over three years to Physical Disability Sports;
- Providing funding of \$300,000 per year through the State Grants Program; and
- Providing funding of \$10 million over three years for an indoor multi-sports facility in Southern Tasmania.

The Government works with not-for-profit organisations and community partners to deliver a diverse range of programs and projects that enhance individual, family and community wellbeing. In 2017-18, ten open, competitive grant programs awarded \$2,654,978 to 185 recipients to support community development.

Recognising the critical role non-government organisations play in supporting social inclusion, and community and individual wellbeing, from 2018-19 the Tasmanian Government is increasing core funding to peak bodies including the Youth Network of Tasmania, the Council of the Ageing, Volunteering Tasmania and the Multicultural Council of Tasmania by around \$20,000 per annum. These peak bodies will now receive \$110,000 per annum, plus project funding, if applicable.

The Tasmanian Government has also committed to elevating three new organisations to peak body status for the first time:

- Carers Tasmania, as the new peak for carers in Tasmania;
- the Tasmanian Men's Shed Association, as the new peak for men's sheds around the State; and
- the Retired Services League (Tasmania Branch) as the new peak for veterans in Tasmania.

A leading example of the impact of non-profit organisations on community and individual wellbeing is Tasmania's men's sheds, with 57 sheds located in communities across the State. Men's sheds provide a safe outlet for men to meet and share information while working on community projects. This has been shown to improve health outcomes through increased physical activity and increased awareness of mental health issues like anxiety and depression.

The Government also works with, and provides funding to, community organisations representing different population groups that experience multi-faceted disadvantage, and their carers and volunteers, to better facilitate social inclusion.

The Tasmanian Government provides Seniors Card and Companion Card programs, as well as programs that assist Tasmanians experiencing multiple and extreme disadvantage, such as Emergency Food Relief, Food Vans, Energy Hardship and the Family Assistance Program.

The Tasmanian Government recognises the mental health needs of veterans, and is working to develop initiatives to offer support. Initiatives include a \$100,000 Dago Point Retreat that will provide a bush retreat for veterans and their families; and the development of a \$225,000 Active Recreation Project that will provide a program specifically designed to meet the mental health and wellbeing of participating veterans and provide a pathway to training and employment in the outdoor recreation sector.

The Tasmanian Government also funds mental health consumer and carer advocacy groups in Flourish and Mental Health Carers Tasmania respectively. These organisations provide important advocacy and support for people with a lived experience of mental illness, or family and friends of people with a mental illness.

### 3.12 Intensive Family Engagement Service

In many cases, better mental health outcomes can be achieved for children, young people and their carers if children can be supported to remain safely in the home, rather than being placed in the care system. The Intensive Family Engagement Service (IFES) was introduced in 2018 to provide earlier and more intensive intervention with families to maintain their cohesion and avoid the need for children or young people to enter out of home care.

The service is provided statewide via four funded service providers. IFES aims to assist families who have not yet reached the threshold for statutory intervention, but whose situation exceeds the capacity of lower intensity services (such as the Integrated Family Support Service). It provides intensive services directly in the family home designed to build the capacity of the family in order to keep the children and young people in the home and out of the child protection system.

### 3.13 Children and young people in out of home care

Children and young people in out of home care (OOHC) are at higher level risk of mental health problems and illness.

This may arise from a range of factors including:

- the impact of past abuse and neglect and the neurobiological impacts of trauma;
- whether they access timely and adequate services to address trauma and mental health problems;
- whether the care they receive meets their wellbeing needs; and
- feelings of social exclusion and social stigma from being associated with the OOHC system.

The *Outcomes Framework for Children and Young People in Out of Home Care (Tasmania)*<sup>4</sup> was released by the Tasmanian Government in October 2018 as a first step to improving the wellbeing and future success of vulnerable children and young people unable to live with their parents by establishing clear expectations of what successful out of home care looks like. An approach to monitor and report on the Tasmanian Outcomes Framework for Children and Young People in OOHC is under consideration.

Birth families of children and young people in out of home care are at risk of mental ill-health. Many may have mental health problems or mental illnesses which have led to, or contributed to, the removal of a child or young person. Child removal is traumatic for both the parents and the child or young person. It may lead to an overwhelming sense of loss and grief for the parent while on a practical level, parents may experience reduced income (through reduced income support), greater financial stress and greater housing instability. These pressures combined with dealing with legal processes, maintaining positive access with their child or young person and fulfilling conditions necessarily set by the Tasmanian Department of Communities Tasmania's Child Safety Service (CSS) may compound social isolation and mental health concerns.

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<sup>4</sup> Department of Communities Tasmania. (2018). *Outcomes Framework for Children and Young People in Out of Home Care*, [https://www.dhhs.tas.gov.au/children/strongfamilies-safekids/out\\_of\\_home\\_care\\_foundations\\_project](https://www.dhhs.tas.gov.au/children/strongfamilies-safekids/out_of_home_care_foundations_project)

Foster and kinship carers are at risk of mental ill-health due to inadequate social participation and inclusion. Kinship carers are particularly vulnerable as many are coping with family breakdown or changes in family dynamics, grief and loss and can become socially isolated. Carers may benefit from strong peer support networks, both formal and informal, to build supportive networks around them.

### **3.14 Youth at Risk Strategy**

The Tasmanian Government recognises that the voice of young people, especially those who are vulnerable or isolated, is often not heard by policy makers or service providers.

In 2017, the Tasmanian Government released the *Youth at Risk Strategy*. Action 26 of the Strategy seeks to improve youth participation through the development of innovative consultative practices to provide these young people with a voice. During 2018, the youth at risk project team met with almost 400 young people across Tasmania to gain their feedback on how Government and service providers could better engage and consult with young people.

The feedback obtained from consultations with young people informed the development of a draft document *Youth Matters – A practical guide to increase youth engagement and participation in Tasmania*. This document has been designed to provide policy makers and service providers with a range of resources and tips to enable them to better engage with young people who use their services. It will also provide young people with more opportunities to have their ideas heard and understood by government and service providers, during the design and review of youth services.

### **3.15 Tasmania's Affordable Housing Strategy 2015-2025**

*Tasmania's Affordable Housing Strategy 2015-2025* (the Strategy) establishes three strategic interventions to address housing need and homelessness in Tasmania:

1. Prevention – through new supply of housing for rent or purchase by low to moderate income earners, new supply of social housing including longer-term supported accommodation, and more funding for home ownership assistance.
2. Targeted early intervention – through better access to services and support including private rental assistance initiatives.
3. Rapid response and recovery – through crisis and transitional accommodation, including funding for Rapid Rehousing models where private rentals are leased by registered<sup>5</sup> community housing providers to be let to eligible people, such as people with mental health illness.

As at December 2018, the *Affordable Housing Action Plan 2015-2019* is on track to assist over 1,600 households by June 2019 including the new supply of 941 affordable lots and homes; this includes assistance for people who have identified mental ill-health as a reason for needing housing assistance.

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<sup>5</sup> Registered under the [National Regulatory System](#) for community housing

Various models of supported housing have been operating for many years overseas and more recently in Australia. The literature suggests the challenge in evaluating effectiveness and efficiency of the models is the diverse approaches in relation to the types of housing provided and the intensity and duration of support. However, Parsell et al point out that it is “repeatedly demonstrated across studies...that...the combination of support and permanent housing delivered within the one program, rather than in isolation, that contributes to increased effectiveness of both housing and non-housing outcomes.”<sup>6</sup>

Supported housing models are suited to the step-up: step-down approach set out in the Productivity Commission’s Issues Paper.

Extensive consultation with community, industry, local and state government stakeholders over a three-month period has shaped the *Affordable Housing Action Plan 2019-2023*. Through the Second Affordable Housing Action Plan, access to supported accommodation will be tailored to the specific housing and support needs of vulnerable cohorts. This will vary from transitional models of rapid rehousing with lease terms of up to 12 months, to more secure housing models to provide residents with longer term support to successfully transition to independence or to remain for the duration of need and age in place. This will include community homes to support residents with mental illness.

Commitments under the Second Affordable Housing Action Plan include:

- Identifying the housing and support needs for people with mental illness in inpatient care to plan for more suitable accommodation and greater choice when they leave.
- Constructing new community homes in small groups of units for people with chronic mental illness. These will provide secure lease terms and long-term clinical and psychosocial support to help people sustain their homes and live within their community. This investment is part of the \$20 million Tasmanian Government’s election commitment to deliver more appropriate homes for Tasmanians living with disability.
- Working with community housing providers to expand Rapid Rehousing for people with mental illness in inpatient care who have lower support needs to transition them into independent living with appropriate supports in place. This action complements the Tasmanian Government’s election commitment to introduce the Housing and Accommodation Support Initiative Trial to better link housing with clinical and psychosocial rehabilitation supports for Tasmanians with mental illness.

### ***3.16 Housing and Accommodation Support Initiative Trial***

The Housing and Accommodation Support Initiative (HASI) is a partnership between the Tasmanian Health Service, Housing Tasmania and Colony 47 to provide Tasmanians with mental illness better clinical and psychosocial rehabilitation supports, linked in with stable housing and supported accommodation.

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<sup>6</sup> Parsell, Moutou, Lucio and Parkinson (May 2015), Supportive housing to address homelessness, AHURI Final Report No.240 and Parsell and Moutou (April 2014), An evaluation of the nature and effectiveness of models of supportive housing, AHURI Positioning Paper No. 158

The HASI initiative is based on similar models in other jurisdictions<sup>7</sup> and aims to provide adults who have a mental health diagnosis with access to stable housing, clinical mental health services and accommodation support specifically to:

- provide people with mental illness ongoing clinical mental health services and rehabilitation within a recovery framework;
- assist people with mental illness to participate in community life and to improve their quality of life;
- assist people with mental illness to access and maintain stable and secure housing; and
- establish, maintain and strengthen housing and support partnerships in the community

The trial will commence in the second quarter of 2019.

### ***3.17 Rapid Rehousing***

Rapid Rehousing is an initiative that provides housing assistance to people in need including for clients exiting Mental Health Services inpatient units and prisoners exiting Tasmanian Prison Services.

Rapid Rehousing provides transitional accommodation (leases up to 12 months) at subsidised rent.

The initiative is designed to assist vulnerable people to access safe and affordable housing while they transition to independent living.

It is a partnership between the Tasmanian Government, registered Community Housing Providers and Housing Connect.

**Prisoner Rapid Rehousing** is designed to prevent prisoners exiting prison without secure accommodation. The initiative is funded by the Department of Justice and administered by Housing Tasmania.

Prisoner Rapid Rehousing tenants are provided with support to transition back into the community, to access and maintain stable accommodation, and to address issues which may contribute to reoffending, through the Beyond the Wire Salvation Army Throughcare Service.

**Mental Health Rapid Rehousing** is designed to address known blockages for clients who are approved for discharge from in-patient care but who remain as inpatients because they do not have appropriate and affordable post-discharge accommodation. The initiative is funded by the Tasmanian Health Service and administered by Housing Tasmania.

### ***3.18 Tasmania Prison Service - mental health taskforce***

The Tasmania Prison Service has a mental health taskforce looking at support to prisoners with mental health illnesses. The taskforce will examine processes and procedures relating to prisoner psychiatric care assessments and prisoner discharges and identify options for ensuring that prisoner health assessments and prisoner discharge processes are as rigorous as they can be.

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<sup>7</sup> <https://www.sprc.unsw.edu.au/research/projects/evaluation-of-hasi-plus/>

The taskforce will provide advice to the Minister for Corrections and the Minister for Health, through the Secretary of the Tasmanian Department of Justice and the Secretary of the Tasmanian Department of Health, on ways in which delivery of mental health services to prisoners and people who are remanded can be improved.

### ***3.19 Coordination and integration***

The need for coordination and integration increases with client acuity and the number of service needs or interactions. For individuals with multiple and complex needs, coordination and integration can mean the difference between the success or otherwise for client experiences of the service system.

Tasmanian Government research into coordination services found that service barriers can include:

- a lack of understanding and coherent service and support response across inter-related comorbidities and psychosocial issues;
- poor information sharing to build this understanding;
- a service system that can be transactional, guided by intervention specific practice;
- the uptake of providing trauma-informed care; and
- services that are not designed to build self-agency and capability for service consumers.

A new service model, known as the Lead Support Coordination Service (LSCS) is currently being trialed in Tasmania. The LSCS accepts clients with multiple and complex needs and aims to address the above-mentioned barriers. The LSCS requires service workers to develop professional relationships with clients, and guide service and support based on client-defined goals. This process is required over time to unravel the complexity, risks, strengths and motivations for clients, to base a service around client life-goals.

The efficacy of LSCS is evaluated against the relationship between activity, client outcomes, and results from Assessment of Quality of Life – 8 Dimension (AQOL-8D) surveys. Evidence from the evaluation of the LSCS suggests that quality of life for clients improves under the program and that the service model could be investigated for broader application to capture more clients with multiple and complex needs. Further research for clients with multiple and complex needs could consider unit costs to government, or broader social costs. This may provide further evidence for governments when considering changing how services are designed and offered to people with multiple and complex needs, including mental health needs.

### ***3.20 Wellbeing program for emergency services providers***

The Tasmanian Government has provided recurrent funding to the Department of Police, Fire and Emergency Management (DPFEM) for a Health and Wellbeing Program for emergency first responders including police, fire, ambulance and the state emergency service. The Government has provided this support in recognition of the susceptibility of emergency services personnel to Post Traumatic Stress Disorder and other mental health problems, both on account of the severity of incidents that emergency service workers attend and the cumulative effect of incidents attended over a long period of time.

This funding is being used to provide a pro-active preventative program in relation to both physical and mental health, providing intervention and support as necessary. This initiative is critical to the health and wellbeing of emergency service workers and ultimately, the health and efficiency of the organisations.

The Program will integrate current wellbeing services with external services to provide a mix of proactive and preventative measures to:

- detect and respond early to health and wellbeing risks that may impact the ability of emergency service workers to perform at their optimal level;
- support the promotion of wellbeing across emergency service agencies; and
- educate and empower emergency service workers to maintain and improve their wellbeing.

In shaping the Program, DPFEM has worked with other national emergency service agencies and advisory bodies, and has used internal and external research, including the recent results from the Beyond Blue: Answering the Call Survey.

### **3.21 Workers Compensation for public sector workers**

Under the *Workers Rehabilitation and Compensation Act 1988*, a worker is entitled to claim compensation if they suffer an injury or disease, such as post-traumatic stress disorder (PTSD), if their employment substantially contributed to their disease.

The *Workers Rehabilitation and Compensation Amendment (Presumption as to Cause of Disease) Bill 2019* (currently before the Tasmanian Parliament) seeks to amend the Act to include a rebuttal presumption in relation to PTSD for public sector workers. The legislation is the first of its kind in Australia and will make it easier for public sector workers experiencing PTSD to claim compensation.

The Tasmanian Government has also committed to introducing legislation by 30 June 2019 to remove the workers compensation 'step down' provisions that apply to police officers who are on workers compensation as a result of operational-related injury issues. The amendments will enable these police officers to continue to receive 100 per cent of their pay while on workers compensation. The Government allocated \$150,000 per annum over four years in the 2018-19 State Budget to support this commitment.

### **3.22 Mentally healthy workplaces**

Various programs and supports are in place to promote mentally healthy workplaces across the Tasmanian State Service.

The Diversity and Inclusion Policy commits the Tasmanian State Service to building inclusive workplaces and having a workforce that reflects the diversity of the Tasmanian community.

The Tasmanian State Service is also taking steps to establish a framework to support mental health in workplaces. The key areas of focus of the framework will include supporting and responding; protecting and preventing; and promoting mental health. The framework is an evidence-based integrated approach with researchers engaged to review the materials developed.

Tasmanian Government agencies offer employees access to the Employee Assistance Program (EAP). The EAP is a confidential service that can support employees through a variety of issues and can help support mental health.

State Service agencies meet on a regular basis to discuss opportunities to enhance health and wellbeing, sharing resources and activities including those in the workplace mental health space.

WorkSafe Tasmania has a renewed focus on its health and wellbeing advisory services. There are opportunities to use free educational sessions on various topics from an allied health trained advisor, and one of the topics include mental health in the workplace. WorkSafe Tasmania also lists workplace mental health as one of its priority industry areas.

In addition to whole-of-government initiatives, Tasmanian Government agencies implement their own programs to promote positive mental health in the workplace. For example, the Tasmanian Department of Premier and Cabinet (DPAC) has developed and implemented policies and practices around flexible work, bullying and other issues that may impact on people's ability to stay mentally healthy.

In 2018, DPAC launched the 'what works for me' campaign to promote workplace flexibility. Additionally, DPAC has a zero tolerance policy towards violence and aggression and maintains White Ribbon accreditation.

### ***3.23 Measures and monitoring***

The Tasmanian Government has been testing the use of AQOL instruments for clients accessing multiple human services.

AQOL-8D contains questions on independent living, happiness, mental health, coping, relationships, self-worth, pain and senses. It specifically includes questions about social participation and exclusion. These instruments have limitations (for example they capture information about some types of visual or auditory sensory issues, but ignore others), but they are generally useful for providing a holistic understanding of how an individual is faring, and changes over time.

The National Survey for OOHC, run by the Australian Institute of Health and Welfare is conducted every two years. It surveys children and young people in OOHC to gain their perspectives on how their needs are being met. Some of these are reflected as measures under the National Standards for OOHC.

The Department of Communities Tasmania focuses particularly on population groups that experience multi-faceted disadvantage, including mental ill-health, which can create complex barriers to social participation. For example, lesbian, gay, bisexual, transgender and intersex Tasmanians; children, young people and their families; migrants and refugees; older persons; people experiencing family violence; those requiring housing assistance; and people living with disability.

## 4. CONCLUSIONS

Much is being done across the Tasmanian Government and by community organisations to promote mental health, and to prevent and respond to mental ill-health through specialised services to the community and across the workforce. In spite of the efforts and resources being dedicated towards mental health, mental ill-health continues to negatively impact the wellbeing of many Tasmanians, and to constrain productivity.

Tasmania looks forwards to the findings and recommendations of the Productivity Commission's inquiry into the social and economic benefits of improving mental health.

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