

Better Care Together

*A plan for Queensland's state-funded
mental health, alcohol and other drug services to 2027*

2022-23 State Budget: MHAOD Funding Commitment

- Through the 2022-23 State Budget the Queensland Government committed **\$1.645 billion** in new funding over the next five years to improve mental health, alcohol and other drug services and for a range of initiatives to support suicide prevention.
- This funding will support the Queensland Government to deliver:
 - *Better Care Together*
 - responses to recommendations of the Mental Health Select Committee – *Report No. 1, 57th Parliament – Inquiry into the opportunities to improve mental health outcomes for Queenslanders*
 - Bilateral Schedule to the National Mental Health and Suicide Prevention Agreement
 - *Achieving balance: The Queensland Alcohol and Other Drugs Plan 2022-2027*

Better Care Together

- New five-year plan setting strategic directions and priorities
- It will **transform, optimise, and grow** state-funded culturally safe and comprehensive treatment, harm reduction, care and support, and responses to mental health crisis including suicidality.
- Focuses on balancing the provision of MHAOD treatment, care and support across community and hospital-based services, delivering an optimal mix of services, the right treatment and beds, for the right purpose at the right time.

Available here: <https://www.health.qld.gov.au/system-governance/strategic-direction/plans/better-care-together>



Context for Priority 5

- Learning from *Connecting Care to Recovery: a plan for Queensland's State-funded mental health, alcohol and other drug services 2016-2021*.
- Current MHAOD workforce issues
- A national approach to MHAOD workforce issues
- Mental Health Select Committee recommendations
- Queensland Health workforce strategy development

Learning from *Connecting Care To Recovery*

- Priority 2 – workforce development and optimisation of skills and scope
- Focused on:
 - enhancing capacity and capability through individual, organisational and system level workforce development
 - exploring service models which optimise the expertise and scope of practice of the workforce and increase therapeutic, psychosocial and rehabilitative outcomes for individuals
 - improving capacity of frontline workers to respond to individuals, families and carers through training and skill development.
- Evaluation found:
 - while learnings from workforce projects were integrated into practices in some HHSs, a lack of recurrent workforce funding constrained capacity to embed practices across the system
 - workforce continues to be under pressure, which is likely to increase without further investment and a focus on workforce development
 - the different regional, rural and urban workforce challenges and opportunities will need to be reflected in the activities supported under next plan.

Current MHAOD workforce issues

- In 2020-21, in HHS delivered services there were:
 - Nearly 8,000 FTE
 - nurses, allied health and administration staff made up the largest component of this workforce.
- Lived Experience (Peer) workforce needs to be supported to grow and be fully utilised to provide a full range of support services to individuals.
- Challenges:
 - stigma associated with MHAOD careers
 - attrition associated with ageing/fatigue
 - insufficient pipelines for new workers
 - shortages across MHAOD specialised work streams
 - appropriate mix of clinical and non-clinical multi-disciplinary team members and scope of practice issues
 - inequitable workforce distribution
 - cultural capability

A national approach to MHAOD issues

- National Mental Health and Suicide Prevention Agreement
 - support alignment to the National Mental Health Workforce Strategy
 - ensure students and graduates receive a mix of rotations between the acute and community/primary care settings
 - promote mental health careers as a career option
 - support a national approach to attracting an overseas workforce
 - build structures and supports for LE workforce
- Review/renewal of the *National Alcohol and Other Drug Workforce Development Strategy 2015-2018*
 - Commonwealth Government via National Centre for Education and Training on Addictions (NCETA) and collaboratively with jurisdictions
 - initial feedback being considered
 - ongoing consultation planned

Summary of Mental Health Select Committee recommendations

- Support clinical supervision and training and development
- Support MHAOD workforce planning and development
- Incentivise QH MHAOD jobs in regional and rural areas
- Support scholarships to pursue MHOAD qualifications
- Support the MHAOD workforce to utilise full scope of practice
- Leverage the counselling, allied health workforce, and role of pharmacists
- Grow and support the LE workforce

Interaction with Queensland Health Workforce Strategy

- New 10-year Queensland Health workforce strategy being developed
- Focused on Queensland Health workforce, not broader health sector workforce in Qld
- Three key themes:
 - ***support and retain current workforce*** – scope of practice, leadership, culture and wellbeing, training and education
 - ***build new pipelines of talent*** – workforce models, developing capability, upskilling and training qualifications from entry level
 - ***Adapt and innovate new ways to deliver*** – Models of care, digitalisation and partnerships

Priority 5 Improving workforce capability and sustainability

Priority 5 Improving workforce capability and sustainability

Attraction, recruitment and retention

- **Attracting and recruiting people**

- liaise with educators to embed MHAOD modules in pre-vocational pre-registration and post-graduate clinical and non-clinical study
- promote career pathways and embed leadership opportunities to increase retention
- establish graduate and trainee coordinators to support new graduates and annual trainee positions
- develop pathways to support First Nation equity targets across MHAOD workforce
- support people with lived experience and diverse backgrounds to join the MHAOD workforce
- increase LE workforce across MHAOD services
- increase specialist multicultural workforce across MHAOD services

Priority 5 Improving workforce capability and sustainability

Supporting workforce sustainability cont'd

- **Retaining the workforce in state-funded MHAOD services**
 - establish dedicated training positions to support mentoring and supervision of new and existing MHAOD workforce
 - provide secondments, scholarships and grants for priority workforces to enhance their MHAOD skills
 - expand multi-disciplinary access to MHAOD scholarships especially for LE, First Nations and multicultural workers
 - develop and deliver a state-wide stigma reduction program and other training to support mental health and wellbeing of MHAOD workforce
- **Attracting and retaining the workforce in regional, rural and remote state-funded MHAOD services**
 - establish additional dedicated rural generalist MHAOD medical positions
 - embed locally sustainable LE workforce support in rural and remote HHS regions
 - partner with other community stakeholders to co-design and deliver local responses

Priority 5 Improving workforce capability and sustainability

Skills and capability development

- **Supporting the entry-level workforce to obtain minimum and desirable skills**
 - provide scholarships to obtain Cert IV and Diploma qualifications in LE and/or mental health/AOD
- **Enhancing the skills of the existing multidisciplinary workforce**
 - invest in statewide training providers to develop and deliver evidence-based training
 - establish dedicated educator and coordinator positions (e.g. LE, First Nations, eating disorders, psychiatry)
- **Enhancing multidisciplinary practice and models of care**
 - support clinical and non-clinical MHAOD workstreams to work to optimal scope of practice particularly in multi-disciplinary teams

Priority 5 Improving workforce capability and sustainability

Enhancing workforce capability cont'd

- **Enhancing the cultural capability of the workforce**
 - continue to enhance the knowledge and capability of the MHAOD workforce to respond to diversity and provide culturally capable treatment, care and support
 - establish Aboriginal and Torres Strait Islander positions to lead and inform MHAOD service responsiveness to First Nations peoples
 - support the MHAOD workforce to undertake training in cultural safety, anti-racism and trauma informed approaches
 - support state-funded MHAOD services to fully embed LE, First Nations and specialist multicultural workers within teams to support and provide culturally capable treatment, care and support

Priority 5 Improving workforce capability and sustainability

Implementation and measuring success

- Governance
 - Aligned to broader approach under *Better Care Together* and MHAOD investment
- Roles and responsibilities
 - Key internal and external stakeholders will be critical to success
- Implementation plans
 - MHAOD workforce recruitment plan
 - MHAOD mentoring, supervision and training plan
- Monitoring and evaluation
 - Achieving a MHAOD workforce operating at full scope of practice
 - Growth and distribution of the workforce across state-funded MHAOD services
 - Satisfaction and wellbeing of the workforce

www.health.qld.gov.au