

The National Mental Health Commission's

# Corporate Plan

# 2020–2024



**Australian Government**

**National Mental Health Commission**

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# Introduction

I, as the Chief Executive Officer (accountable authority) of the National Mental Health Commission, present the 2020–2024 National Mental Health Commission’s Corporate Plan as required under section 35(1)(b) of the *Public Governance, Performance and Accountability Act 2013*. The Corporate Plan has been prepared for the 2020-21 financial year and covers the reporting periods of 2020–2024, as required under Division 1 16E(1) of the *Public Governance, Performance and Accountability Rule 2014*.

This plan is prepared in accordance with the *Public Governance, Performance and Accountability Rule 2014*.

This plan sets out our purpose, what we will do to achieve that purpose and how we will measure our success.

The National Mental Health Commission’s Annual Report 2020–21 will report against the first year of this plan.



**Ms Christine Morgan**  
**Chief Executive Officer**

24 August 2020

# Purpose

## **Our vision**

All people in Australia are enabled to lead contributing lives in socially and economically thriving communities.

## **Our mission**

Promote understanding of the outcomes that matter and drive transformational change across service systems for people with lived experience of mental health issues.

## **Our values**

### Excellence

- We believe everyone is capable of great things in a great environment.
- We strive for success and celebrate it when we achieve it.
- We know and use evidence to inform our decisions.
- We support innovation and continuous improvement, and are committed to helping build the evidence base.
- We are credible and respected.

### Integrity

- We are honest and trustworthy in all that we do.
- We stand up for what we believe in.
- We respect each other's differences.
- We value human rights and social justice.
- We believe in equity and opportunity for all.

### Collaboration

- We value individuals, interactions and connectedness.
- We respect and acknowledge everyone's input, skills and experience.
- We believe in working together.
- We acknowledge the importance of effective communication.
- We support engagement and participation at all levels to enhance our outcomes.

### Accountability

- We value our independence and transparency.
- We take accountability for our commitments and actions and expect no less of others.
- We are reflective and open to feedback.
- We ensure correct information.

# Contributing Lives, Thriving Communities

At the Commission we believe that everyone has the right to lead a Contributing Life, built from:



The Commission’s purpose is to provide independent robust policy advice and evidence on ways to improve Australia’s mental health and suicide prevention system, and to act as a catalyst for change to achieve those improvements through monitoring and reporting on investment in mental health and suicide prevention initiatives and ongoing engagement with stakeholders across the mental health and related sectors. The underpinning aim is to ensure that all Australians are able to lead a full and contributing life.

Throughout 2020–21 and over the next three years, the Commission will seek to continue to ensure that investment in mental health is both effective and efficient. We will work with stakeholders – particularly with people with lived experience, their families and other support people – to ensure reforms are collectively owned and actioned. The Commission acknowledges that engaging stakeholders and facilitating meaningful participation is essential to achieving transformational change.

The Commission seeks to engage with those with a lived experience of mental health issues, including carers and other support people, in all areas of our work. We affirm the right of all people to participate in decisions that affect their care and to determine the conditions that enable them to live contributing lives. Diverse and genuine engagement with those with lived experience, their families and other support people adds value to decision-making by providing direct knowledge about the actual needs of the community, which results in better targeted and more responsive services and initiatives.

Throughout its existence, the Commission has applied the *Contributing Life* framework to its work – whole-of-person, whole-of-system, whole-of-life approach to mental health and wellbeing. This means we consider people across the lifespan – from pre-birth to old age.

A contributing life can mean many things. It can mean a fulfilling life enriched with close connections to family and friends; good health and wellbeing to allow those connections to be enjoyed; having something to do each day that provides meaning and purpose – whether it be a job, supporting others or volunteering; and a home to live in, free from financial stress and uncertainty. In short, it means thriving, not just surviving.

The Commission will work to support individuals to: live a contributing life; have equitable opportunity; have the best possible mental health and wellbeing; participate in community, education and employment; have knowledge, assurance and respect; and be able to contribute to socially and economically thriving communities.

Indigenous Australians have significantly higher rates of mental distress, trauma, suicide and intentional self-harm, as well as exposure to risk factors such as stressful life events, family breakdown, unemployment, racism, discrimination, imprisonment, crime victimisation and alcohol and substance misuse. Aboriginal and Torres Strait Islander mental health and social and emotional wellbeing is a priority across all the Commission's work and the Commission is committed to building on our close working relationship with First Nations leaders and communities to ensure that mental health, wellbeing and suicide prevention responses in the mental health reform agenda are informed and led by their input and guidance.

The Commission will facilitate collaboration across all sectors to promote mental health and prevent mental illness and suicide – this includes health, housing, human services, income support, justice, education, employment, defence, veterans' affairs and the broader system to maximise outcomes and integrate service provision and system reform.

# Environment

Mental illness and suicide are significant public health issues in Australia and internationally. Poor mental health and wellbeing has significant personal, economic, productivity and social impacts. The converse is also true – improving the mental health and wellbeing of all Australians is the fundamental building block to every person living a contributing life in a thriving community.

A complex challenge facing Australian governments, the private sector and the community is to achieve better coordinated and integrated support across a range of sectors and systems, and to ensure that all services are person and family centred. Timely access to quality mental health and physical health treatment and care is important, but to prevent mental health difficulties and enable recovery, individuals and their loved ones also need timely access to the right type of social, economic and community-based supports as a coordinated response. Addressing stigma and discrimination is also critically important.

These issues transcend portfolio and intergovernmental barriers, and include employment, education, housing, justice, income support, early childhood and family support, aged care, psychosocial services and the needs of Indigenous and culturally and linguistically diverse communities.

Australia's mental health system is the focus of a current reform agenda including the *Productivity Commission Inquiry into mental health* and the *Royal Commission into Victoria's Mental Health System* being conducted between 2019 - 2020. These reviews along with *Vision 2030; Blueprint for Mental Health and Suicide Prevention*, the *Fifth National Mental Health and Suicide Prevention Plan* and the *National Children's Mental Health and Wellbeing Strategy* will provide a significant national reform program, in which governments have demonstrated a commitment to invest.

The last twelve months have been particularly challenging for Australians with the health and financial impacts of COVID-19 and recent bushfires, floods and drought. The COVID-19 pandemic is posing significant health, social and economic challenges for all Australians, with a number of at-risk groups likely to be impacted due to vulnerability or existing mental illness. There is strong evidence from previous pandemics and broader research related to the economic impact of recessions that there are risks of increasing mental ill health, including new presentations of mental distress and illness, increased substance use and incidences of inter-personal, generational and family violence, impacts from trauma, and increased risk of suicide in the longer term.

Australia's mental health sector has been agile in responding to the increasing support needs of Australians with new opportunities including the expansion of digital services and telehealth as well as innovative community-based models of care. There remain areas that need to be addressed in the immediate and long-term responses to mental health and suicide prevention including the need for people to be able to access help and treatment where they live, work and learn, and in their community. A shift is needed to achieve this goal across every community and with the commitment of all governments through the *National Mental Health and Wellbeing Pandemic Response Plan* work is being done to address the gaps and to invest in the necessary system reforms to achieve better outcomes for everyone.

Australia's response to the COVID-19 pandemic (including surge responses as required) will strongly contribute to our future. The compelling opportunity is to learn from the mental health and wellbeing response in such a way as to build on the system reform.

# Performance and Key Activities

## 1. Mental Health and Suicide Prevention System Performance and Reform

### Key Activities in 2020-21 and over the forward estimates:

The Commission monitors and reports on Australia's mental health and suicide prevention system to support continuous improvement, accountability and transparency with a particular focus on system performance, outcomes and impacts on mental health and wellbeing.

The Commission delivers an annual national report to the Australian Government and the community that provides an assessment of the progress of current reforms and the impacts on communities, the incidence and impact of any significant events during the period, and areas of the system that still require focus.

The Commission also considers the outcomes and the experiences of mental health consumers and carers, using analyses at national, regional and local levels (where appropriate), and will identify and report on areas where further change is needed. The needs of Aboriginal and Torres Strait Islander people and other at-risk groups warrant specific attention to ensure that their needs are being appropriately addressed.

The Commission also delivers an annual report to Australian Health Ministers on the progress of the implementation of the Fifth National Mental Health and Suicide Prevention Plan (Fifth Plan). This report provides specific analysis of data and qualitative information against the indicators specified in the Fifth Plan. The consumer and carer report outlines experiences of mental health care as part of the Commission's role in independently monitoring and reporting on the progress of implementation of the Fifth Plan.

### Targets in 2020–21

1. National Report on Mental Health and Suicide Prevention  
Publicly release the annual *Monitoring mental health and suicide prevention reform: National Report 2020* by 31 November 2020.
2. The Fifth National Mental Health and Suicide Prevention Plan  
Deliver the *Fifth National Mental Health and Suicide Prevention Plan: 2020 Progress Report* to Health Ministers.
3. Deliver the *Fifth National Mental Health and Suicide Prevention Plan, 2020: The consumer and carer perspective*.
4. Suicide prevention  
Work collaboratively with the Australian Institute of Health and Welfare (AIHW) and the Australian Government Department of Health (DoH) to deliver the National Suicide & Self-harm Monitoring System and website.

### Targets over the next four years:

5. Monitor and report
  - Continue our independent monitoring and reporting on whole-of-life outcomes and experiences of mental health consumers and carers, tracking progress in implementing national mental health and



suicide prevention reforms and monitoring and reporting on investment in mental health and suicide prevention initiatives.

- Continue to work with the relevant agencies to assess action on recommendations made in reports.
- Undertake investigative work and deliver spotlight reports for areas that require more specific and detailed evidence and information to inform the mental health and suicide prevention system needs.

#### 6. Data and data capability

Drive further development of data and data capability to support comprehensive national reporting on whole-of-life outcomes and system performance, by:

- Working in partnership with the AIHW and the Australian Bureau of Statistics to analyse data for key indicators in national reporting frameworks.
- Exploring further data linkage opportunities.

## 2. Shaping the Future – Strategic Reform and Catalyst for Change

### **Key Activities in 2020-21 and over the forward estimates:**

The Commission delivers independent evidence based advice to the Australian Government where there is a priority need, identified or emerging issue and to target specific areas for Government focus.

The Commission works to strengthen the mental health and suicide prevention system to meet the future needs of the community and works with stakeholders to develop and implement national approaches to system improvement and investment.

The Commission is committed to building on our close working relationship with First Nations leaders and communities to ensure that mental health, wellbeing and suicide prevention responses in the mental health reform agenda are informed and led by their input and guidance.

The Commission is also committed to the mental wellbeing of older people who should be regarded with the same breadth and priority as the mental wellbeing of other age groups. Integration of mental wellbeing alongside other aspects of an older person's quality of life should be regarded as a basic human right.

### **Targets in 2020–21**

- Deliver the implementation roadmap for *Vision 2030; Blueprint for Mental Health and Suicide Prevention*.
- Deliver the National Children's Mental Health and Wellbeing Strategy.
- Deliver the national framework to guide a coordinated approach to improve how governments respond to and support people's mental health before, during and after natural disasters.
- Continue to work closely with government and the community to implement the *National Mental Health and Wellbeing Pandemic Response Plan*.
- Lead the Mentally Healthy Workplace Alliance to progress the development of the National Workplace Initiative.
- Consider and respond to the outcomes of the Productivity Commission's Inquiry into the social and economic benefits of improving mental health in relation to the Commission's role and the mental health and suicide prevention sector.
- Consider and respond to the outcomes of the Royal Commission into Victoria's Mental Health System.

- Consider and respond to the outcomes of the Royal Commission into Aged Care Quality and Safety and the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability and other Royal Commissions and inquiries.
- Develop policy work and advice for innovations in e-mental health.

***Targets over the next four years:***

- Continue to develop policy work and advice for innovations in e-mental health.
- Work to increase the contribution and participation of communities in system reform.
- Deliver the National Workplace Initiative.
- Provide evidence-based advice through submissions, studies and direct responses to requests.

### 3. Consumer and carer engagement and participation

**Key Activities in 2020-21 and over the forward estimates:**

Diverse and genuine engagement with people with lived experience, their families and other support people adds value to decision-making by providing knowledge that informs how to better design and target services and make them more responsive. Their perspective can also assist in developing policy options, in the governance and evaluation of initiatives and services, and in the education and training of staff.

The Commission actively promotes the right of all people to participate in decisions that affect their care and the conditions that enable them to live contributing lives and will document and promote best practice in consumer engagement and participation. Consideration will include strategies to enable the engagement and participation of Aboriginal and Torres Strait Islander people, LGBTIQ+, people living with a disability and those of other vulnerable groups such as those who are culturally and linguistically diverse.

***Targets in 2020–21:***

- Deliver the consumer and carer guide for safety and quality in participation. (*Fifth Plan: Action 21.3*)
- Conduct an annual survey and deliver the consumer and carer report to understand the impact of the Fifth Plan activities for consumers, carers, families and support people.
- Commence work to increase the contribution and participation of communities in reforming the mental health and suicide prevention system.

***Targets over the next four years:***

- Monitor and report on the level of engagement and participation with consumers and carers by the key stakeholders responsible for implementing the Fifth Plan.
- Continue to increase the contribution and participation of communities in reforming the mental health and suicide prevention system.

### 4. Workforce growth and development

**Key Activities in 2020-21 and over the forward estimates:**

A sustainable, skilled and appropriate workforce is fundamental to the effective and safe provision of care and support for people with mental illness, their families, carers and support people. However, there are

ongoing concerns about the distribution and future sustainability of mental health and suicide prevention workforces, including the need to develop national professional consumer and carer peer workforces and capability within services accessed by Aboriginal and Torres Strait Islander people.

Although these issues have long been recognised as a priority in national and other strategies, the mental health and suicide prevention workforce is an area that continues to be identified to the Commission as requiring attention.

The Fifth Plan includes a specific action for the Commission ‘to develop a Workforce Development Program that will guide strategies to address future workforce supply requirements and drive recruitment and retention of skilled staff.’ In the context of this stream of work, the Commission will highlight areas for improvement to support workforce growth and development in mental health and suicide prevention.

The Australian Government is developing a National Mental Health Workforce Strategy to build a sustainable, well distributed and culturally competent mental health workforce to deliver services across Australia over the next ten years from 2020. This strategy will be submitted to Health Ministers for endorsement.

#### ***Targets for 2020–21***

- Deliver the Peer Workforce Development Guidelines to clarify role delineation for peer workers and effective anti-stigma intervention with the health workforce, progressed in consultation with all governments, mental health commissions, consumers and carers and the mental health sector. (*Fifth Plan: Action 29*)
- Progress the development of the National Mental Health Workforce Strategy with DoH and key stakeholders.

#### ***Targets over the next four years***

- Provide evidence-based advice on specific issues relating to the mental health and suicide prevention workforces, including the peer workforce.

## **5. Mental health research**

### **Key Activities in 2020-21 and over the forward estimates:**

Research into mental health and suicide provides practitioners and policy makers with the evidence base to support informed decision making and provide better outcomes for consumers and carers.

The Commission is committed to enhancing the capacity and capability of the mental health sector to support research endeavours. A National Mental Health Research Strategy will assist with this goal, including methodologies to identify priority areas for future research and for achieving optimal translation of research into practice. Ensuring a research approach that encompasses Aboriginal and Torres Strait Islander people and research that actively involves those with lived experience of mental health issues, their families and other support people will be essential.

#### ***Targets in 2020–21:***

- Deliver the National Mental Health Research Strategy (NMHRS) developed in collaboration with the National Health and Medical Research Council, Medical Research Future Fund, consumers and carers, states and territories, research funding bodies and prominent researchers. (*Fifth Plan: Action 28*).

- Develop and implement a mechanism for ongoing monitoring, re-prioritisation and oversight of mental health research in Australia.

***Targets over the next four years:***

- Monitor and identify emerging gaps or opportunities in mental health research in Australia.

## **6. Strengthen the Commission to enhance effectiveness**

**Key Activities in 2020-21 and over the forward estimates:**

The Commission works to continuously improve its performance and operations.

***Targets in 2020–21:***

- Continue to strengthen the Commission’s role as a respected and authoritative national leader in the development of an integrated and well-functioning mental health and suicide prevention system.
- Develop a community and stakeholder engagement strategy and implementation plan to embed effective and efficient stakeholder engagement into our strategic approach and operations.
- Align Advisory Board meetings with the Key Work Areas and structure meetings to enable strategic input and expertise into the work program.
- Continue development of the Risk Management Framework and further embed risk management throughout the Commission.
- Align staffing and budget resources with key priorities.
- Enhance staffing capability, skill and expertise through targeted recruitment, training and development.

***Targets over the next four years:***

- Build the efficiency and effectiveness of the Commission, support and develop staff and continue to improve operations within budget.
- Continue to engage with a diverse range of stakeholders to inform the Commission’s work.
- Continue to improve the Commission’s website functionality and content, and access to information.

# Operating context

The Commission is a listed entity under the *Public Governance, Performance and Accountability Act 2013* with the Commission's purpose set out in clause 15 of Schedule 1 of the *Public Governance, Performance and Accountability Rule 2014*.

## Advisory Board

The Commission has an Advisory Board that works with the Chief Executive Officer to strengthen relationships across the sector, identify issues and opportunities for improvement in the mental health sector and provide strategic direction to the work program. Advisory Board members are appointed by the Government and bring a range of relevant expertise and experience. They are committed to giving an independent view of system performance and a voice to the experiences of people living with mental health difficulties or suicide risk, and their families and support people.

## People and Capability

To achieve the Commission's purpose, expertise in public sector policy, mental health and suicide prevention is needed. The Commission engages highly skilled and experienced staff and has a culture of professionalism with leadership and resources that enable a high standard of performance. Staff demonstrate the values of the Commission in all that they do, and are afforded opportunities to build their skills, with continuous learning promoted.

The Commission actively encourages and promotes a mentally healthy workplace.

## Collaboration and Engagement

The Commission collaborates and partners with external stakeholders to influence change and drive improvement and to maximise effort and resources. The Commission engages across sectors, jurisdictions and internationally to improve the evidence base and to leverage expertise and resources and ensure robust, reliable and accountable advice and reporting.

The Commission seeks to foster open and collaborative partnerships through participation in international, regional, national and jurisdictional sector committees and forums, establishing project advisory groups with representation of key stakeholders that meet regularly to inform and guide the development of our work; and undertaking consultations and engagement programs via workshops, surveys, public forums and targeted interviews.

The Commission also works closely with government agencies including DoH and mental health agencies in each of the jurisdictions.

The Commission has in place a Paid Participation Policy which recognises the valuable specialised and expert contributions made by people who have a first-hand experience of a mental health condition or are a family member or other support person.

## **Risk Management**

The Commission's risk profile and tolerance is somewhat different to other Commonwealth agencies. We are a small entity that provides independent advice and reports to Government and the community on mental health outcomes and reform, at arms-length from the departments and agencies that manage funding and services.

A relatively high overall appetite for risk is behind the Commission's main functions and greatest opportunities – delivering regular, independent reports on Australia's performance in promoting good mental health and wellbeing, preventing mental ill health, and supporting people living with mental health difficulties and their families and friends; and providing frank and fearless advice on issues of national significance or impact. In other areas the Commission has no tolerance of risk, that is, of dishonest, deceptive and fraudulent conduct.

The Commission's approach to risk management is supported by an Audit Committee, comprised of at least two independent members who have a broad range of skills including finance and risk management, and auditing standards in a public sector environment. The Commission's Risk Management Framework complies with the Commonwealth Risk Management Policy.

Collectively, the Commission strives for a culture and a risk management approach that helps us continuously improve. This brings many potential benefits, including an increased likelihood of achieving goals and meeting expectations; improved identification of opportunities and threats; improved stakeholder confidence and trust; and growing organisational resilience, operational effectiveness and efficiency.

Individually, managing uncertainty and risk in a highly fluid environment is the responsibility of all Commission staff. They are expected to understand and manage risk as part of their everyday work. This applies to key decisions and, in particular, to processes for developing reports and policy advice, to significant projects and procurements, major events, outsourced services, contract management, secretariat services and community engagement.