

National Mental Health Commission
August 2021

Corporate Plan 2021-2025



Australian Government
National Mental Health Commission

Introduction

I, as the Accountable Authority of the National Mental Health Commission, present the 2021-2025 National Mental Health Commission's Corporate Plan, which covers the period of four years, as required under paragraph 35(1)(b) of the *Public Governance, Performance and Accountability Act 2013*. The Corporate plan has been 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 2021-22 will report against the first year of this plan.

A handwritten signature in black ink, appearing to read 'CMorgan', with a long horizontal flourish extending to the right.

Ms Christine Morgan
Chief Executive Officer
Commissioner

3 September 2021

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Purpose

The National Mental Health Commission's purpose is to provide 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.

The National Mental Health Commission (the Commission) works to this purpose through monitoring and reporting on investment in mental health and suicide prevention initiatives and through ongoing engagement with stakeholders across the mental health and related sectors, identifying gaps in the system, the needs of users of the system (including consumers, carers, families and service providers) and opportunities for policy advice, system change and service improvement. The overriding aim is to ensure that all Australians are supported in their mental health and well-being needs so as to enable them to lead a full and contributing life.

Throughout 2021-22, and over the next three years, the Commission will continue to work 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 and collectively owned and actioned. The Commission acknowledges that engaging stakeholders and facilitating meaningful participation is essential to achieving transformational change.

The Commission prioritises engaging with people with a lived experience of mental ill health and suicide including carers and other support people, to ensure reforms reflect these experiences and insights, and are collectively owned and actioned. 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.

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 facilitates collaboration across all sectors working to promote 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. We also work closely with government agencies including the Department of Health and mental health agencies in each of the jurisdictions and agencies across sectors.

The National Suicide Prevention Office (NSPO) is a new office within the Commission that is being established to lead a national whole-of-government approach to suicide prevention. The NSPO will build capability to deliver a national whole of governments approach to suicide prevention, by integrating collaborative efforts, harnessing a national approach, and reducing duplication. It will ensure those aspects of suicide prevention, which due to scalability, the need for consistency, and reach are implemented at a national level in consultation with all jurisdictions, and it will report on progress.

Operating Context

The Commission supports the Government to strengthen the mental health and suicide prevention system in Australia to meet the future mental health and suicide prevention needs of the community.

Environment

Mental illness and suicide are significant public health issues in Australia and internationally. Poor mental health has 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 being supported to live a contributing life.

A complex challenge facing 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 treatment and care is essential, but to both prevent mental illness and support recovery, individuals and their loved ones need timely access to the right type of social, economic and community-based supports. Addressing stigma and discrimination is also critically important.

The past eighteen months has presented considerable additional challenges for our mental health and well-being. It has tested the capacity of many of the support systems, such as the health and social services systems, and the economy in general to deal with complex crises and respond rapidly in innovative ways. People with new presentations of mental ill health concerns have been reaching out for the first time and found the system lacked connected pathways of care that work across both the mental health and health systems. Rapid access to assessment, treatment and support for the individual and their carers was missing across the spectrum of mental illness at the level that was required by the consumer.

Australia's mental health system is also the focus of a current reform agenda shaped by a number of reports including the Productivity Commission's final report, the Royal Commission into Victoria's mental health system, the Royal Commission into Aged Care Quality and Safety, the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability and the National Suicide Prevention Advisor's Suicide Prevention Final Advice Report to the Prime Minister. The recommendations in these reports reflect different elements of what makes an efficient and effective system that meets the needs of, and improves outcomes for, people with lived experience, their families and the community more broadly.

The Commission's role in supporting the reform of the mental health and suicide prevention system is undertaken through collaboration and engagement with a broad range of stakeholders. It incorporates information and data from sources both within and external to the traditional health or mental health areas, across sectors, jurisdictions, communities and internationally. This approach informs the Commission in its role of providing evidence based reports and advice that represent diverse perspectives and are connected to community need. In the current environment of the Covid-19 pandemic, innovative ways are needed to connect with mental health sector stakeholders, consumers and carers and to the people that support them. The Commission's aim is an outward focused one of reaching people where they live, work and gather. This requires new approaches, as well as traditional methods, to ensure as many people as possible are provided with an opportunity to speak and be heard.

Capability

Over the past eighteen months, the Commission has prioritised its resources to ensure capability to support the Australian Government's response to the mental health and suicide prevention reform agenda following the release of the Productivity Commission Inquiry Report on Mental Health and the National Suicide Prevention Advisor's Final Advice to better meet the needs of individuals and communities. Through 2021–22 and beyond, the Commission will continue to monitor the external operating environment and adjust our internal capability as required to ensure support continues to be efficient, effective and responsive.

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 and suicide prevention sector and provide strategic direction to the work program of the Commission. Advisory Board members are appointed by the Commonwealth Government and bring a range of relevant expertise and experience. They support the Commission in its commitment 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

To achieve the Commission's purpose, expertise in public sector policy, mental health issues 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, 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 be informed, 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 its work; and undertaking consultations and engagement programs via workshops, surveys, public forums and targeted interviews. The Commission also works closely with government agencies including the Department of Health and mental health agencies in each of the jurisdictions, including Mental Health Commissions.

A core value and commitment of the Commission is engagement of lived experience across all aspects of its work. In 2021, the Government supported the Commission to create a new position of Director Lived Experience. This senior level position will ensure the Commission's work benefits from a diverse range of lived experience perspectives, including the full breadth of mental illnesses, stages of recovery and population groups. The Commission also has in place a Paid Participation Policy which recognises the valuable specialised and expert contributions made by people who have a lived and living experience.

Understanding and Managing Risk

The Commission's risk profile and tolerance is influenced by its role to provide robust advice to Government and the community in relation to mental health and suicide prevention. It is a small entity that provides such 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.

While it is necessary for the Commission to have an appropriate tolerance for risk to ensure its advice to Government and the community is independent and robust, the Commission has no tolerance for risk of dishonest, deceptive and fraudulent conduct.

The Commission's approach to risk management is supported by its Audit and Risk Committee, whose members have a broad range of skills including finance, risk management and performance reporting in a public sector environment. The Commission's Risk Management Framework complies with the Commonwealth Risk Management Policy.

The Commission strives for a culture and a risk management approach that supports continuous improvement to ensure the Commission has 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.

Managing uncertainty and risk in a highly fluid environment is the responsibility of Commission staff. They are expected to understand and manage risk as a 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 and community engagement.

The Commission has identified six strategic risk categories that could impact on the achievement of its purpose:

1. **Strategic:** Failure to identify what the Commission needs to do or to execute its core requirements.

Mitigating strategies: strong connections, collaboration and engagement with government, sector and jurisdictional stakeholders and monitoring emerging issues and developments to assist in anticipating the need for advice and policy options. The Commission uses regular engagement with its Advisory Board and corporate planning and budgeting processes to ensure priorities are identified so as to allocate resources appropriately for execution of the Commission's requirements.

2. **Service delivery:** Producing substandard work caused by lack of evidence / engagement.

Mitigating strategies: implementation of a structured engagement program including stakeholder management plans for projects and work. The Commission uses structured advisory groups and forums in its projects and has implemented an online consultation and engagement platform. There is also an increased use of alternate mechanisms for access to data.

3. **People management:** High staff turnover and loss of knowledge.

Mitigating strategies: Engage and collaborate with staff for continuous improvement in culture and well-being. Ensure strong linkages of roles with strategic objectives, invest in people and provide

development opportunities, continuous improvement of process and systems and provide support and training to staff.

4. Work Health and Safety: Staff or visitors suffer unwellness injury or death.

Mitigating strategies: Periodic review of the Work Health and Safety Plan and robust associated policies and procedures including regular risk assessments. Working from home ergonomic and risk assessments and ongoing review of arrangements. Compliance with the Protective Security Policy Framework.

5. Operational: Financial and IT systems and processes do not enable and support the Commission's core operations; Loss of or leaking of sensitive data through cyber-attacks.

Mitigating strategies: Systems provided by the Department of Health with periodic review and testing of Business Continuity Plan. Formal policies and procedures in place and reviewed including staff training programs. Compliance with the Protective Security Policy Framework.

6. Compliance: Failure to comply with legislation, Commonwealth directions and loss as a result of fraud or corruption.

Mitigating strategies: Compliance and policy framework overseen by the Audit and Risk Committee with ongoing monitoring and reporting, and staff training programs.

The Commission will continue to integrate, strengthen and embed risk management in all its work. A key focus for 2021-22 and beyond is to ensure staff are actively engaged with risk identification and management across the work of the Commission.

Performance

The Commission has revised its performance measures this year as part of its continuous review and improvement of planning and reporting. The performance criteria and targets in this Corporate Plan set a new starting point for assessing the Commission's performance over time. The Commission will continue to review and refine its performance criteria, targets and methodology over future reporting periods.

The Commission provides support to the Government to improve the mental health and suicide prevention system through monitoring, reporting and policy advice, and being a catalyst for change. It is challenging to identify how to directly and objectively connect the work of the Commission with tangible impacts and outcomes. To measure performance, the Commission will use a revised range of qualitative and quantitative, output, effectiveness and efficiency targets to assess its achievements.

The Commission's revised performance measures identify how it will deliver on its purpose and measure achievement through:

- **Key Activities** that describe the critical functions and activities of the Commission.
- **Performance Criteria** that set out the significant types of work and projects through which the Commission delivers the activity.
- **Targets** that assess whether each performance criteria have been achieved.

A range of methodologies will be used to measure its performance including:

- **Qualitative analysis** - a stakeholder survey will be used to provide an understanding of the success of an activity or project, or the quality and effectiveness of advice.

- **Output measures** will be used to assess performance against key deliverables.
- **Internal analysis** will be used to assess performance through content review and/or case studies.

Performance and Key Activities

1. Mental health and suicide prevention system performance and reform

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.

Key Activities

In 2021-22 to 2025, the Commission will:

Deliver an annual national report to the Australian Government and the community that provides the Commission's views on the progress of current reforms and the impacts on individuals and communities, the incidence and impact of any significant events during the period, and areas of the system that still require focus. It will consider 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, where appropriate, make recommendations on areas where further change is needed. The needs of Aboriginal and Torres Strait Islander people and other priority population groups that warrant specific attention to ensure that their needs are being appropriately addressed will be included.

The Commission will also continue to 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 monitoring and reporting on the progress of implementation of the Fifth Plan.

Performance criteria	Target 2021-22	Target 2023 and beyond
Annual national report publically released on time.	28 February	28 February
The relevance of issues identified in the annual national report, including any recommendations, received by government.	Stakeholder satisfaction >80%	As per 2021-22
The annual <i>Fifth National Mental Health and Suicide Prevention Plan</i> implementation progress report delivered to Health Ministers on time.	30 June	30 June
The <i>Fifth National Mental Health and Suicide Prevention Plan: The Consumer and Carer Perspective</i> delivered to Health Ministers on time.	30 June	30 June

Identify areas that require more specific and detailed evidence and information to inform the mental health and suicide prevention system needs.	Commission specialist spotlight reports and papers	As per 2021-22
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2. Provide advice to the Australian Government on mental health and suicide prevention

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

Key Activities

In 2021-22 to 2025, the Commission will:

Provide evidence based advice to government having regard to a broad range of systems and sectors, with a specific focus on points of intersection, and provide advice about the spectrum of need. This will include promotion and prevention, treatment interventions and support, and what is needed for sustainable recovery and ongoing mental health and wellbeing, and prevention of suicide, including how to improve social and economic participation for those with mental ill health or suicidal risk, and access to social and other supports for economic, housing, employment and physical safety and security. Advice will be based on data and evidence, combined with an understanding of people's lived and living experiences, from both users of services and those working to support them, and from the many examples of innovation across the sector, both in Australia and internationally. The Commission's advice may take the form of plans, frameworks, reports, submissions, studies and direct responses to requests from Government.

Performance criteria	Target 2021-22	Target 2023 and beyond
The government is supported and informed by expert policy advice.	Stakeholder satisfaction >80%	As per 2021-22
Advice is timely and efficient.	Stakeholder satisfaction >80%	100%
Advice is evidence based including lived experience and sector data measured by internal analysis through content review or case studies.	100%	100%
Participate and contribute to government mental health and suicide prevention forums; inquiries and committees.	>20	>20

3. Shaping the future – strategic reform and catalyst for change

The Commission will support the Australian Government to strengthen the mental health and suicide prevention system in Australia to meet the mental health and wellbeing needs of individuals and the community. It will work with stakeholders to develop and implement national approaches to system improvement and investment.

Key Activities

In 2021-22 to 2025, the Commission will:

Deliver national strategies that will identify the long-term requirements for investment, coordination, development and performance measurement to achieve the Government’s investment and commitment to the health and wellbeing of Australians. It will work with stakeholders to develop and implement national approaches to system improvement and investment.

Performance criteria	Target 2021-22	Target 2021 and beyond
Develop a <i>National Children’s Mental Health and Wellbeing Strategy</i> as requested by the Minister for Health as part of the Government’s Long-Term National Health Plan: The strategy outlines the requirements for an effective system of care for children, seeking to create a new, shared understanding of the roles of families, communities, services, and educators in promoting and supporting child mental health and wellbeing. It also provides a framework to guide the most critical investments in our children and families.	Publish September	
Develop and publish <i>Vision 2030; Blueprint for Mental Health and Suicide Prevention</i> , as requested by the Minister for Health, to cast a national direction for mental health and wellbeing in Australia. It is a long-term blueprint for a successful, connected, and well-functioning mental health and suicide prevention system meeting the needs of all Australians.	Publish October	
Deliver the <i>National Disaster Mental Health and Wellbeing Framework</i> to guide a coordinated approach to improve how governments respond to and support people’s mental health before, during and after natural disasters.	Publish October	
In collaboration with the Mentally Healthy Workplace Alliance, lead and deliver the National Workplace Initiative to provide a nationally consistent approach to workplace mental health.	Progress the development	As per 2021-22 To be delivered 2022-23
Develop the National Stigma and Discrimination Reduction Strategy: a vision for a society where all Australians can live long and contributing lives, free from stigma and discrimination on the basis of their experience of mental ill health. A strategy which can be readily implemented in order to effect change at a structural, societal and individual level.	Progress the development	As per 2021-22 To be delivered 2022-23

Collaboration, co-design, stakeholder engagement, consultation or participation in the development of all national strategies, frameworks and plans to ensure collective ownership measured by internal analysis through content review or case studies.	100% participation	As per 2021-22
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4. Collaboration and engagement

The Commission acknowledges that engaging stakeholders and facilitating meaningful participation is essential to understanding their needs and achieving transformational change.

Key Activities

In 2021-22 to 2025, the Commission will:

Engage and collaborate across sectors, jurisdictions and internationally to improve the evidence base for mental health and wellbeing. It will prioritise engagement with people with a lived or living experience of mental ill health issues or suicide risk including carers and other support people, as well as those who provide services, to ensure reforms reflect these experiences, insights and needs, and are collectively owned and actioned.

Performance criteria	Target 2021-22	Target 2023 and beyond
Increase the evidence for whole-of-life outcomes and experiences of mental health consumers, carers and sector representatives including suicide risk.	Publish results from the annual community and stakeholder engagement program	As per 2021-22
Evidence gathered from engagement activities is translated and informs and guides all work: reporting; advising; strategic reform and collaboration and engagement measured by internal analysis through content review or case studies.	100%	As per 2021-22
Maintain and extend the national prominence of mental health and wellbeing through communication, engagement, collaboration and sector community of practise.	>30 webinar, speech, presentation or distribution of targeted information	As per 2021-22