



**Submission to
Community Services & Health Industry Skills Council**

**Review of the
Community Services Training Package CHC02**

Mental Health Coordinating Council of NSW

November 2006

NGO Development Strategy Series

Workforce Development
Quality & Outcomes
Partnerships

The Community Services Training Package Review

The Community Services and Health Industry Skills Council (ISC) is the recognised peak national body providing advice to government and industry on the training and skill development needs of the community services and health workforce.

The ISC has recently commenced the Scoping Phase of the Community Services Training Package (CHC02) Review. This training package includes the Certificate IV in Mental Health Work (Non-Clinical) qualification. This qualification has been proposed, and agreed to in-principle, as a voluntary minimum training standard for mental health workers in non government organisations (NGOs) in NSW.

The ISC has prepared a Background Paper as a basis for engaging industry in the review and have conducted initial Communication Forums in all states and territories as part of this Scoping Phase. A copy of the “CHC02 Review: A Discussion Paper” is available from their website and is also being distributed with this Discussion Paper.

The review process provides opportunities for industry stakeholders to share information about implementation of the Community Services Training Package, workforce directions, leading-edge practices and provide a platform for input into the review of the CHC02 in determining skills solutions for the future.

The Mental Health Co-ordinating Council (MHCC) and the NSW Community Services and Health Industry Training Advisory Board (ITAB) have been working in partnership to provide a sector wide response to the Community Services Training Package Review from NGOs providing mental health services. This discussion paper provides initial feedback from the NGO mental health sector and other interested stakeholders regarding issues to be addressed through the review process.

About The Mental Health Co-ordinating Council

The Mental Health Coordinating Council (MHCC) is the peak body for non-government organisations (NGOs) working for mental health throughout New South Wales (NSW). MHCC's membership includes NGOs, both specialist and mainstream, and other bodies interested in mental health.

As the peak body for NSW, MHCC aims to provide leadership and representation on mental health issues and to improve the mental health of the community by promoting and developing non-government organisations in NSW to provide strong quality services. We facilitate effective linkages between the government, non-government and private sectors acting as the liaison body representing the views of our membership.

About The NSW Community Services and Health Industry Training Advisory Board

The NSW Community Services and Health Industry Training Advisory Board (ITAB) is a non-government organization that acts a peak body for VET issues within the health and community services sector in NSW. It is the key training and assessment information resource hub for the community services and health sectors, providing advocacy, advice, support and leadership. It is a not for profit association formed from, and made up entirely of people and organisations associated with the industry. It is the authoritative voice on the provision of training for the community services and health industry in New South Wales.¹ The ITAB acknowledges - and as been responding to – the need for additional mental health training for community organizations in NSW.

¹ CS&H ITAB website: www.csh-itab.com.au

Summary

MHCC has been working with the NSW Community Services and Health Industry Training Advisory Board (ITAB) to assist NSW NGOs providing services to clients with a mental illness to engage in the review process.

As well as drawing upon results of previous consultations, the MHCC in partnership with the NSW Community Services and Health ITAB held an information and consultation meeting (October 25th 2006) to gain feedback from the NGO mental health sector and other relevant stakeholders about issues relevant to the Community Services Training Package Review.

The main findings from the October 25 Consultation and Review meeting were:

1. There is a poor knowledge and understanding of the VET sector amongst NGO mental health workers, including:
 - a. how the VET system works,
 - b. what the role of the main organisations in the VET sector is,
 - c. what the different levels of qualifications mean,
 - d. what is included in the curriculum of Community Services qualifications including the Certificate IV in Mental Health Work (Non-clinical),
 - e. the language of the VET sector, including terms such as competency, articulation and accreditation.
2. There has been poor take up of the Certificate IV Mental Health Work (Non-clinical) qualification, possibly due to a lack of knowledge about the qualification, inability to access the training (location, cost, time), perceived relevance of curriculum.
3. The use of the term “non-clinical” is very unpopular with workers across the sector. Suggestions for alternative descriptors include “community based mental health work” and “mental health work”.
4. The Certificate IV Mental Health Work (Non-clinical) qualification needs to be modified to provide more useful training to workers in the NGO mental health sector.
5. Training content needs to reflect current practices in the mental health NGO sector and have a psychosocial approach.
6. Modifications to the curriculum need to happen frequently to keep pace with changes in the sector.
7. There is now a need for the Certificate IV Mental Health Work (Non-clinical) qualification to become a minimum standard of training for workers in the sector.
8. There is a need for additional higher level qualifications (Diploma, Advanced Diploma, Graduate Certificate, Graduate Diploma) to meet the needs of NGO workers providing services to clients with mental health problems, working at advanced levels.
9. Training in mental health work needs to be offered to staff from mental health specialist NGOs and to staff from other NGOs who provide services to a client group which includes those with mental health problems.
10. Training for the sector needs to be flexible in its delivery, so as to accommodate:
 - a. different learning styles,
 - b. times people are available to attend training,
 - c. cultural and linguistic diversity
 - d. differing literacy levels and education backgrounds
 - e. needs of rural and remote workers
11. Training needs to be affordable, as NGOs have small (if any) training budgets and NGO staff receive fairly low wages.
12. Training needs to be practical. Theory on its own is not enough. Workers need to practice what they have learnt, where possible training should be work based, or involve work based exercises and / or work experience.
13. There needs to be an emphasis on partnerships with wider the community (carers, other NGOs, GPs, Health and other bodies providing assistance) / care teams, care co-ordination.
14. The most important issue for consumers is the attitude of the workers.

Background

In 2004 MHCC launched its NGO Development Strategy: Mental Health. The Strategy is funded by and run in partnership with NSW Health (Centre for Mental Health). It aims to build the capacity of the NGO sector to meet future mental health needs of the community. This includes working with mental health NGOs as well as NGOs that provide other services to clients who may also have a mental illness.

Workforce development has been a major focus of the Strategy. Extensive consultation was undertaken by the MHCC to determine the vocational education needs of the sector. Documentation from these consultations is provided on the MHCC website (www.mhcc.org.au). This discussion paper draws upon information provided through the consultation processes as well as upon research reports prepared by MHCC and wider research relevant to practices within the NGO mental health sector. The main MHCC research reports informing this paper are:

1. *Pathways to Partnerships The Mapping Analysis And Performance Project Towards a framework for mental health non-government organisations in NSW*, July 2000.
2. *Annual Members Surveys, 2001-2006* (unpublished, summaries in MHCC Annual Reports).
3. *Consultation NGO Development Project, Group 3, Workforce Development*. Annual General Meeting Consultation Report, 2004.
4. *Training and Other Workforce Development Options Paper*, September 2005
5. *Submission to the Productivity Commission's Study Into Pressures Facing the Health Workforce on Training and Workforce Development for the NSW Mental Health NGO Sector*, July 2005.
6. *NSW Mental Health NGO Training Needs Analysis, August 2006*.
7. *Building Effective Non-Government Services in NSW - MHCC Directions 2006*

The 2005 MHCC Training Options paper examined the training system currently available to mental health NGOs in NSW. It found that the NGO sector greatly wants industry specific mental health training and that their needs are not being adequately addressed within the vocational education and training (VET) sector. It found that most mental health training and related planning in NSW targets the clinical workforce only. It made several recommendations for training access to be enhanced and noted wide support for the introduction of a voluntary minimum standard at the Certificate IV in Mental Health Work qualification level. However, these recommendations are dependent on appropriate and relevant training being available and the current situation is that it is not.

A related submission to the Productivity Commission in 2005 highlighted the need for the VET sector to address training for less qualified NGO staff and to provide education for new entrants so as to meet the growing shortage of skilled mental health workers.

In February 2006, the MHCC's NGO Development Project Steering Committee established a Workforce Development Reference Group to provide guidance on what training is needed by the sector and the MHCC's role in addressing this need. The first task of the Reference Group was to conduct a Workforce Development Survey inclusive of a quantified Training Needs Analysis. This necessary information had previously been identified as being beyond the scope of the Training Options paper.

The "*Mental Health NGO Training Needs Assessment*" survey had a 42% response rate and key findings included that 30% of mental health workers had no qualifications and only 5% had a Mental Health Work qualification (the later finding was likely a reflection of both the accessibility, currency & relevance of the qualification). 67% of respondents expressed interest in the possibility of employing Mental Health Work Trainees at some time in the future.

The mental health NGO sector in NSW is growing rapidly and experiencing increasing difficulty with recruitment/retention of staff with mental health competencies

Consultations and other research revealed the NSW NGO mental health sector to be diverse in terms of:

- Organisational size - small volunteer run organisations through to large organisations employing over 100 staff.
- Funds available for training
- Geographic spread – urban, rural and remote
- Educational backgrounds of paid and volunteer staff
- Sources of income – most NGOs had multiple funding bodies
- Services offered² -
 - Consumer support groups (illness related)
 - Community Consultative Committees
 - Carer support groups
 - Supported residential services
 - Advocacy, education and information services
 - Open employment services
 - Telephone support services
 - Drop in centres
 - Clubhouses
 - Supported employment services
 - Consumer networks
 - Respite services
 - Outreach services

Given such diversity within the sector it is not surprising that a common thread to consultations was a noted lack of identity for the mental health NGO workforce.

The NGO mental health sector is experiencing a period of rapid growth, resulting from significantly increased funding available to the sector and also the growing demand for community based mental health services. Consequently there is a need to train new workers to the sector. There is also a need to formally recognise the skills of the current workforce and where necessary to supplement these skills with additional training.

Accompanying the rapid growth of the sector, NGOs are also experiencing many changes in their work practices. Emerging developments in evidence based best practice are integrated into NGO service delivery. In addition to this there is an increased emphasis on quality accreditation, organisational and consumer outcome measurements and accountability.

Consultations have revealed a high need for vocational training to adequately resource and accommodate these changes within the sector. It is important to note that there are significant needs for mental health work training amongst workers who specialize in mental health and also for those who provide other services to clients, some of whom have mental health problems. Non mental health specific NGOs are reporting increasing numbers of people with mental health problems presenting for help and are also challenged to meet this need.

There is a core set of skills that all workers need plus there is also a need for specialist training. Furthermore, the diverse educational backgrounds of the sector must be taken into consideration. Training plans must also accommodate the needs of workers new to the sector (including consumers who wish to become workers), those of workers with extensive experience who lack formal qualifications, volunteers and generalist NGO workers with clients with a mental illness.

Whilst there was a high demand for mental health specific training from NGO staff, there were significant barriers limiting access to training. The main barriers were cost, time, and backfill. These were felt particularly strongly by rural and remote workers.

² MHCC *Pathways to Partnerships The Mapping Analysis And Performance Project Towards a framework for mental health non-government organisations in NSW* July 2000, p.4.

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The rapid growth of the sector emphasizes the need to maintain workers within the sector. The establishment of attractive career paths was seen by the sector as central to achieving this aim. Vocational training, including recognition of prior learning (RPL), articulation into higher education, and a diversity of qualification levels such as post graduate have been identified as central to career path development.

The need for vocational training for NGO staff providing mental health services is growing rapidly. This growth in demand is fuelled by various factors. Most important amongst them are:

- rapid expansion of the NGO mental health sector to accommodate increasing need for community based mental health services
- the need to ensure workplaces are able to implement new developments in evidence based practice
- increased demands for complex accountability
- the need to recognise and measure existing skill levels of workers within the sector

Current training available to NGO mental health workers is provided by numerous training organisations. This means that often training opportunities are not part of a structured program that takes into account the needs of the worker, the organisation or the sector as a whole. Training is often delivered in short courses of one to two day's duration, by a variety of providers, resulting in a patchy distribution of training. The content of training needs to be well planned so as to equip workers with the skills they need in their current and future employment in the sector. This will provide the sector with well trained staff and also equips workers with the skills they need to further develop their career.

The Certificate IV in Mental Health Work (non-clinical) qualification has been identified by the sector as a very practical way of providing relevant skills training. There is a high level of support for the introduction of the Certificate IV in Mental Health Work (non-clinical) qualification to be adopted as a voluntary minimum standard of training for workers in the sector. This will provide workers in the sector with a core set of skills enhancing workplace practices and providing portable skills to assist in career path development.

Occupational names currently associated with the Certificate IV Mental Health Work qualification may include:

Case Worker	Community Support Worker
Co-ordinator	Domestic Violence Worker
Family Support Worker	Health Education Officer
Indigenous Mental Health Worker	Mental Health Worker
Outreach Worker	Rehabilitation Assistant
Senior Support Worker	Support Worker
Welfare Support Worker	Welfare Worker

A learner who completes the Certificate IV in Mental Health Work in NSW has:

- A nationally recognised qualification
- A range of competencies that enable them to be employed in a variety of government, non-government, generalist and specialist environments in the mental health sector
- Competencies that are relevant to a range of occupations within the community services and health industry in order to facilitate employment across this industry
- Knowledge of the nature of the mental health sector and the provision of programs and services for people with a mental illness in Australia, generally, and in NSW in particular.
- Significant credit/articulation to higher education and other CHC02 higher level qualifications.

Qualification graduates can:

- Demonstrate an understanding of mental health sector
- Demonstrate some understanding of the nature of mental illness, the development of mental health problems and related disorders
- Apply knowledge, skills and critical reflection necessary to work in a variety of organisations (government, community based, private and charitable organisations) which provide services and programs to and for people with a mental illness
- Understand people within their social, political, historical and cultural context across the lifespan
- Develop and implement strategies to meet the needs of people with a mental illness from culturally and linguistically diverse backgrounds
- Apply basic counselling skills in a variety of non-clinical mental health settings
- Apply the knowledge and skills necessary to work in a variety of organisations and settings within the mental health sector within relevant roles and boundaries

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- Demonstrate a personal and professional competence based on the ability to critically reflect on their own and others' values, ethics and attitudes
- Utilise specialist communication skills to effectively and appropriately communicate with clients and colleagues
- Develop and maintain effective work networks implement a range of strategies for identifying client issues and referral processes
- Implement client support skills in a variety of mental health settings in a non-clinical capacity
- Provide and process information according to the workplace requirements
- Acquire a sound basis for further tertiary study or in-service training in the mental health sector

The Certificate IV currently requires 14 units of competency from the Community Services Training Package to be completed with 11 of these being compulsory. There are currently only four mental health specific units of competence – only two of which are compulsory for the Certificate IV in Mental Health Work qualification. The mental health specific units are highlighted below for ease of identification.

The 11 compulsory units for the Mental Health Work qualification are:

1.	CHCMH1B	Orientation to mental health work
2.	CHCCS9A	Provide support services to clients
3.	CHCMH4C	Provide non-clinical services to people with mental health issues
4.	CHCCOM3C	Utilise specialist communication skills to build strong relationships
5.	CHCCS301A	Work within a legal and ethical framework
6.	CHCOHS401A	Implement and monitor OH&S policies and procedures for a workplace
7.	CHCCS402A	Respond holistically to client issues
8.	CHCCS405A	Work effectively with culturally diverse clients and coworkers
9.	CHCNET4A	Work with other services
10.	CHCCS403A	Provide brief intervention
11.	CHCCS501A	Assess and respond to individuals at risk of self harm or suicide

The remaining three units can be selected from a wide range of electives as listed below. Those that consultation has indicated are most relevant to current skills shortage in mental health work in NSW are marked with an asterisk.

1.	BSBCMN206A	Process and maintain workplace information
2.	CHCCD2B	Provide community education projects
3.	CHCCD4C	Develop and implement community programs
4.	CHCCHILD1C	Identify and respond to children and young people at risk of harm*
5.	CHCCH26A	Support client participation in the organisation*
6.	CHCCM1C	Undertake case management*
7.	CHCCS3A	Coordinate the provision of services and programs
8.	CHCCS10A	Facilitate client participation in the organization*
9.	CHCCS304A	Assist with self medication*
10.	CHCCS401A	Facilitate cooperative behaviour*
11.	CHCCS406A	Provide education and support on health, wellbeing and parenting
12.	CHCDIS6C	Plan and implement community integration
13.	CHCGROUP3C	Plan and conduct group activities*
14.	CHCHPROM1A	Share health information
15.	CHCHPROM2A	Implement health promotion and community intervention
16.	CHCMH8A	Provide interventions to meet the needs of consumers with mental health and alcohol and other drug problems*
17.	CHCNET2B	Maintain effective networks
18.	CHCORG5B	Maintain an effective work environment
19.	CHCRF2A	Provide intervention support to children and families
20.	CHCYTH10A	Work effectively with the families of young people
21.	CHCAOD8C	Assess the needs of clients who have alcohol and/or other drug issues OR
22.	CHCAOD2C	Orientation to alcohol and other drugs work
23.	HLTFA1A	Apply basic first aid OR
24.	HLTFA2A	Apply advanced first aid

An additional mental health specific unit, **CHCMH7A “Provide, with consumers, support interventions to meet the needs of carers and families”** is also available and can be chosen as an elective. Any other unit of competence from the CSTP can also be chosen as an elective.

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The previous 1999 training package also included a Certificate III, Diploma and Advanced Diploma in Mental Health Work qualifications. It is unclear why these additional qualifications were omitted from the 2002 framework. The NSW community sector would benefit from reintroduction of at least the Diploma & Advanced Diploma qualifications (ie, to improve professional development/career pathways for mental health NGO staff, to address current and anticipated skills shortages in mental health work in NSW).

The Review Discussion Paper also speaks to the introduction of Vocational Graduate Certificates and Diplomas to strengthen professional development and career pathways for community workers with tertiary qualifications.

The Community Services Training Package Review commenced September 2006, 2 years after the commencement of the NGO Development Strategy: Mental Health. The timing of the Review is opportune as it is able to draw upon previous consultations and other research undertaken as part of the NGO Development Strategy.

The MHCC has been working in partnership with the ITAB to establish a Certificate IV Traineeship in Mental Health Work and this should be available by 2007.

The MHCC is now working in partnership with the ITAB to:

1. Promote the Mental Health Work Traineeship.
2. Develop learning and assessment strategies/materials linked to the Mental Health Work qualification.
3. Provide NSW NGO mental health sector wide input to the review of the Community Services Training Package & Mental Health Work qualification/s.

This discussion paper reports on initial input from the NSW NGO mental health sector to the review of the Community Services Training Package & Mental Health Work qualification/s.

Mental Health NGO Sector Involvement in the Review Process

MHCC has been working with the NSW Community Services and Health Industry Training Advisory Board (ITAB) to assist NSW NGOs providing services to clients with a mental illness to engage in the review process.

To engage the mental health NGO sector in the review of the Community Services Training Package MHCC and the ITAB held an information and consultation day concerning the review of the Community Services Training Package. The meeting was held on Wednesday 25th October. There were nineteen (19) people attending the meeting representing a diversity of stakeholders from:

- Mental health specific NGOs
- Other NGOs providing services to people who have mental health problems
- Relevant peak bodies
- Mental health consumers
- NSW Health (Transcultural Mental Health)
- Training organisations

In addition two (2) written responses were received providing further input into the review process. Apologies were received from a further fourteen (14) organisations, with most also requested that they be kept informed with developments in this area.

Invitations were sent to all MHCC members and other relevant stakeholders. Invitations included a letter outlining the major issues for consideration in the review process as revealed by earlier consultations. Other documentation was also provided to inform participants of the review process. It is listed below and included as attachments to this discussion paper. Those who were not able to attend the meeting were able to access information about the review process through the information package. The package consisted of:

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- Letter explaining review process, how people / organisations can be involved and outlining some key issues to consider
- Community Services & Health Industry Skills Council (ISC) "CHCO2 Review: A Discussion Paper", August 2006
- Brief Discussion Paper developed by the MHCC regarding the review.
- Participants Agenda
- Review Workgroup Exercise

During the review meeting participants were provided with information about the Vocational Education and Training (VET) sector, the key organisations in the sector, the review process and how they can have input into that process. Then meeting then broke into small groups for a comprehensive consultation exercise, specifically addressing the review of the Community Services Training Package.

This Discussion Paper 2 (November 2006) builds upon the previous MHCC Brief Discussion Paper (October 2006) - Review of Community Services Training Package – CHC02, Certificate IV in Mental Health Work (Non-Clinical) – CHC41102, and incorporates findings from the consultation undertaken during the review meeting and also upon previous consultation findings.

Some Comments About The CHC02 Review

The following comments have been developed by the MHCC to generate discussion in response to the CHC02 Review generally and Certificate IV in Mental Health Work qualification in particular. While the comments are based on mental health NGO sector consultation it is acknowledged that they do not necessarily represent the views of everyone within the sector.

The Community Service Training Package (CHC02)

- There is a need for more mental health specific units of competence to be developed (ie, there are currently only four in the CSTP). While it is understood that the CSTP strives to have as many generic units as possible the demand for mental health specific training is high, unmet and will continue to grow as a result of both government directions and new funding for mental health services in both specialist and other community organizations.
- "Child protection" units of competence do not adequately incorporate issues about legal responsibilities and/or service provision in responding to adult disclosures of childhood neglect/abuse (ie, for the Mental Health Work qualification this is currently an elective CHCCHILD1C "Identify and respond to children and young people at risk of harm"). It is now well established that the development of and difficulties in coping with health and social problems are strongly associated with childhood abuse. There are also issues related to protection of young people who may be currently at risk should the perpetrator still be living.
- There is a need for more content related to behavioural risk assessment and management as a core aspect of community service delivery. While this is sometimes about preventing and responding to "violence" in community services the MHCC views this content more broadly. For example, the current CHCOHS301A "Implement & monitor OH&S policies and procedures for a workplace" compulsory unit and/or CHCCS401A "Facilitate cooperative behaviour" elective unit in the Mental Health Work qualification do not adequately address these most important worker and client safety issues.

The Mental Health Work Qualification/s

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- The phrase “non-clinical” is generally not supported by the mental health NGO sector (ie, some NGOs provide clinical services, the phrase is not supportive of positive professional and sector identity)
- The revised CHC02 should also include Diploma and Advanced Diploma in Mental Health Work qualifications (ie, to facilitate professional development & career pathways)
- The above qualifications should focus on advanced practice as opposed to - or in addition to – developing management competencies.

The Certificate IV in Mental Health Work (CHC41102)

- The current Certificate IV in Mental Health Work qualification is poorly packaged with there being considerable overlap in several compulsory units of competence, most notably:
 - CHCCS9A Provide support services to clients &
 - CHCMH4C Provide non-clinical services to people with mental health issues
 - CHCCS402A Respond holistically to client issues &
 - CHCCS403A Provide brief intervention
 - There is generally also considerable overlap between all 4 of the above units
- All mental health specific units of competence should be included as compulsory coursework for the Mental Health Work qualification/s
 - CHCMH1B Orientation to mental health
 - CHCMH4C Provide non-clinical services to people with mental health issues
 - CHCMHAOD Provide interventions to meet the needs of consumers with mental health and AOD issues
 - CHCMH7A Provide, with consumers, support and intervention to meet the needs of carers and families
- Note that the mental health specific CHCMH7A is not currently either a compulsory or recommended elective unit.
- The CHCMH7A unit should be separated into two units (i.e. one for consumers and another for carers focus/participation) with both being compulsory.
- Other possible mental health specific and/or generic units should reflect contemporary best practice in psychosocial rehabilitation and emphasise mainstream community integration principles (i.e., not just be a low level support/clinical rehabilitation service).

While further industry consultation needs to occur around this matter some examples could include:

- Effective interventions in psychosocial rehabilitation (eg, consumer/carers education, living/social skills training, supported employment, medication, etc). Each of these could be a unit on its own as the body of evidence around, and skills necessary to ensure, their effectiveness is considerable.
- Coordinating care with GPs, clinical mental health services and other service providers.
- Group work should be included as a compulsory unit i.e., CHCGROUP3C, Plan and conduct group activities
- Need a unit on “Outcome Measurement” unit and/or this could be included throughout other units (i.e., need to extend on the concept of service “review” to include quantifiable and information technology based best practice).

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- Additional advise on the clustering of units within a revised Mental Health Work qualification/s would be very helpful (i.e., current content is not linked to any sort of cohesive theory or model regarding psychosocial rehabilitation).

Key contacts for providing feedback at MHCC are:

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2. Mental Health Training NEEDS ASSESSMENT for the NGO sector in NSW (Draft)
3. MHCC Workforce development survey results (draft)
4. MHCC consultation with mental health consumers regarding training for the NGO mental health sector, Friday 29th September 2006
5. MHCC consultation with FONGA members regarding training for the NGO mental health sector, Friday 6th October 2006
6. MHCC Options Paper - Training and Other Workforce Development for the Mental Health NGO Sector, September 2005