

The Hon Pru Goward MP
Minister for Mental Health
Minister for Medical Research
Assistant Minister for Health
Minister for Women
Minister for the Prevention of Domestic Violence and Sexual
Assault

Dear Minister Goward,

Subject: Support for Physical Health initiatives across mental health community services in NSW.

Research statistics have clearly established that people with mental illness have a life expectancy approximately 20 years less than that of the general population. The Mental Health Coordination Council (MHCC) urge the Minister support concrete actions to reverse the appallingly high instances of early death among people living with long-term mental health conditions, and the increasing prevalence of associated poor physical health issues for these people.

Early in 2014 the MHCC in partnership with the University of Sydney completed a 6 month scoping study and review funded by the Mental Health Drug and Alcohol Office (MHDAO). In this study physical health related practices currently provided by NSW mental health community organisations were explored and compared to best practice internationally. The study studied perspectives of staff, consumers and carers in regards to the benefits, strengths and weaknesses of programs currently available in NSW.

The outcomes highlighted in the study demonstrated both innovative one-off programs and activities being delivered, that are in line with international best practice. Clearly articulated was the need for more systematic, sustainable practices in supporting people with mental health conditions to address their physical health needs, as well as enhancing methods of knowledge sharing and experience across sectors.

The literature internationally and in Australia points to a widespread lack of systemic, routine appraisal of the physical health needs of people living with mental health conditions. This is in line with our study which showed that this similarly remains the case within the mental health community managed sector (CMO) and more broadly in NSW.

Whilst clear from this review and subsequent developments during the intervening period that some CMOs have substantially progressed work in this context, there is still much to be done at both workforce training and programmatic levels. Likewise, in addition to embedding a cultural shift ensuring that physical health care is appropriately considered in the context of trauma-informed, recovery oriented, person-centred care, such programs and services must be supported by seamless transition from public service settings to community based contexts, including primary health care.

What is also critical is that a review of programs and services in the community that are collecting data and evaluating positive outcomes from both a service and consumer perspective should be scoped and benchmarked, so that best-practice models can be shared across services and systems.

The need for physical health initiatives is highlighted in the *NSW State Health Plan: Towards 2021*, particularly in the context of promoting cross-health system integration and identifying the next steps we need to take to continue and progress the delivery of world-class care in NSW. The plan refers to: “the provision of seamless, effective and efficient care that reflects the whole

of a person's health needs, from prevention through to end of life, across physical and mental health, in partnership with the individual, their carers and family and across public/private and Commonwealth/ State boundaries." Likewise the Mental Health Commission's *Living Well: A Strategic Plan for Mental Health in NSW 2014 – 2024*, emphasises the need for: "urgent action to improve the physical health and life expectancy of people with mental illness and to ensure the health system responds as it should to their physical ailments", and that action would require not only engagement and participation among health disciplines and service providers but with other portfolios across government.

Despite these important strategic plans identifying physical health initiatives as a key priority across the health and mental health sectors, the work undertaken is largely unfunded. Some larger organisations in the mental health community managed not-for-profit space have somehow found the funds to support programs from other funding streams. However, in the context of imminent changes shortly to occur under the Partnerships for Health initiative, and in the context of the NDIS, it may become increasingly difficult to continue these programs. MHCC strongly advocate that the issue be considered and addressed across government service systems, and that the Minister be instrumental in promoting these matters to Minister Skinner enabling the health and mental health sectors to make a meaningful and long term contribution to improving the physical health of people with mental health conditions.

To this end in respect of MHCCs constituency I ask the Minister to consider the previously provided funding submission (re-attached here) which due to the recent inclusion of a specific MoH contract KPI on physical health outcomes for people accessing mental health programs now has increased application and timeliness.

The primary focus of the proposal is provision of a Physical Health Infrastructure Grant Round to the sector designed to seed fund establishment of processes and activities within organisations and between organisations and primary and other health care agencies. MHCC has experience administering infrastructure grant rounds on behalf of MHDAO and would welcome the opportunity to again undertake this role on behalf of the MoH.

I would like to arrange a delegation of leaders and champions in the sector who have strongly urged us as the peak body to advocate on their behalf to ensure mental health programs and services can deliver on the new KPIs enabling better physical health outcomes for people with mental illness.

Thank you for your consideration

Yours sincerely,



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Cc: Karin Lines
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