

## QLEWN Submission to Mental Health Select Committee: Inquiry into Opportunities to Improve Mental Health Outcomes for Queenslanders



The following submission addresses a number of sections in the Terms of Reference (TOR) including:

1a: The economic and societal impact of mental illness in Queensland.

1b: The current needs and impacts on the mental health system in Queensland.

1c: Opportunities to improve economic and social participation of people with mental illness through comprehensive, coordinated, and integrated mental health services (including alcohol and other drugs and suicide prevention):

1. across the care continuum from prevention, crisis response, harm reduction, treatment and recovery
2. across sectors, including Commonwealth funded primary care and private specialist services, state funded specialist mental health services, non-government services and services funded by the NDIS.

1e: The mental health needs of people at greater risk of poor mental health.

1f: How investment by the Queensland government and other levels of government can enhance outcomes for Queenslanders requiring mental health treatment and support.

1g: Service safety and quality, workforce improvement and digital capacity.

### Background

The future of mental health care is in building recovery- oriented approaches, providing meaningful support to people and modelling positive outcomes from service experiences. A thriving mental health Lived Experience workforce is a vital component of quality, recovery-focused mental health services (Dep. Health, 2015).

A well-supported Lived Experience workforce results in benefits for people accessing services, families, and service providers, as well as the broader community. Tangible benefits to mental health service providers include improved engagement with service users, more sustainable treatment outcomes, a reduction in critical incidents and the need for urgent care. This has flow-on benefits for the health workforce as a whole, improving staff retention and wellbeing (NMHC Lived Experience (Peer) Guidelines, 2020).

The Lived Experience Workforce (LEW) is significantly expanding across Mental Health, Alcohol & Other Drug (MHAOD) and the Suicide Prevention (SP) services in Queensland. As the sector moves away from a deficit based framework and moves towards a Social and Emotional Wellbeing agenda, the value the LEW contributes - towards organisations providing services and to the people and communities who receives services - is substantial. Supported by recent key strategy and reform initiatives including the Productivity Commission and the Lived Experience (Peer) Guidelines, it is anticipated the LEW will only continue to on this growth trajectory.

However, currently this remains an unregulated workforce with few formalised structures in place to support safety and quality. With no oversight of professional bodies, the success and sustainability of the LEW in the health system is disadvantaged.

QLEWN recommends the Queensland government provide **urgent funding and other supports** needed for the immediate support of the growing LEW. What follows is a list of the identified issues which need addressing:

**Gap #1: Peak Body representation for the Lived Experience Workforce**

The MHAOD & SP require a funded and sustainable Peak Body to represent and advocate the LEW.

**Gap #2: Strategy and investment to implement and progress the Queensland Lived Experience Framework (QMHC)**

Since its launch in late 2019, the Queensland Lived Experience Framework has had no driving force behind its implementation. Investment is required to support organisational readiness to embed the framework within services. Further promotion and resources are needed, which should be oversighted by LE leadership to ensure true co-design and participation.

**Gap #3: Quality Assurance of Lived Experience professional training and development (including Certificate IV in Mental Health Peer Work)**

Recent work undertaken collaboratively by QLEWN, The Queensland Alliance of Mental Health and TAFE Queensland identified significant issues in the delivery of the Certificate IV in Mental Health Peer Work, including:

- Needing to build capacity of LEW/identify LE Educators to deliver course content
- Review and updating of course content to ensure relevance and purpose
- Lack of formal placement opportunities for students to complete 80 hours peer practice
- Equitably accessible tutoring and learning support delivered by experienced LE Educators
- Barriers to Regional, rural and remote learning and support opportunities.

Attention is also needed in training and development towards specialisations in peer work, including First Nations peoples, CALD, AOD, Perinatal and Infant, Child & Youth, LGBT+ and Suicide Prevention.

Broadening the scope of qualifications available to Lived Experience Workers, including Intentional Peer Support and Emotional CPR, as well as higher qualifications in peer work and mad studies need to be offered.

**Gap #4: Community of Practice, leadership and mentorship for Lived Experience Workers across Queensland**

Reflective practice (supervision, debriefing, co-reflection etc) is an essential component of safe and quality peer practice. LEW need regular access to structured communities of practice, leadership and mentorship initiatives delivered by LE leaders.

**Gap#5: Greater resourcing of Lived Experience Researchers and Academics**

Providing opportunities for academia and researchers to undertake LE led projects is essential to increase the evidence base of the effectiveness of LE work.

**Gap #6: The National Lived Experience Workforce Guidelines and Standards to be prioritised for implementation**

The launch of the National Lived Experience (Peer) Guidelines in December 2021 was a milestone for the development of the LEW. These guidelines need to be prioritised for implementation within Queensland services, including resourcing and infrastructure costs.

## Who is QLEWN?

The Queensland Lived Experience Workforce Network (QLEWN) is a focused state-wide peak body led by, with and for the Lived Experience workforce within the mental health, alcohol and other drugs and suicide prevention sector. QLEWN acts as a united voice for Queensland's Lived Experience government, non-government and private workforces to drive focused Lived Experience led advocacy and system reform.

Working since 2018 as an unincorporated entity supported by the Brisbane North PHN and Brook Red, QLEWN is currently transitioning into an incorporated association. QLEWN is committed to progress the agenda of the Lived Experience Workforce across Queensland, with identified priorities in sector leadership, education and training and advocacy.

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