

Workplan: Integrated treatment, care and support

This document has been prepared as a companion to the *Integrated treatment, care and support for people with co-occurring mental illness and substance use or addiction: Guidance for Victorian mental health and wellbeing and alcohol and other drug (AOD) services* (the Guidance). It is intended to support stakeholder understanding of how various mental health and wellbeing system reforms intersect with, promote and contribute to the integrated treatment, care and support agenda.

The reforms are organised under the five ‘enabler’ categories that reflect advice from stakeholders during consultation on the Guidance as to the kind of implementation effort most needed to fully realise recommendation 35 from the Royal Commission. The reforms presented here do not represent the full mental health and wellbeing reform program or its structure.

The Workplan represents a point in time and will continue to evolve in line with the design and implementation of related reforms. The Department of Health will monitor its implementation to ensure integrated treatment, care and support is embedded across relevant reforms.

Questions regarding specific recommendations and their progress general reform questions from stakeholders can be directed to mentalhealth@health.vic.gov.au.



1. Collaboration and governance

Cross-sector relationships, collaborative spaces and new structures to support implementation and oversight of integrated treatment, care and support

Recommendation	Implementing integrated treatment, care and support	Intersections with integrated treatment, care and support	Indicative timeline	Lead Director
Recommendation 1 (interim report): Establish the Victorian Collaborative Centre for Mental Health and Wellbeing (the Collaborative Centre).	The Collaborative Centre will: <ul style="list-style-type: none"> provide, promote and coordinate high quality services to people with mental illness, including people with co-occurring substance use or addiction deliver interdisciplinary, translational research into new treatments and models of care, inclusive of integrated treatment, care and support support the workforce through education and professional development, including building their integrated care capability work closely with the new statewide service for people living with mental illness and substance use or addiction (recommendation 36) to drive integrated practice. 	<ul style="list-style-type: none"> Establish via Governor in Council appointment the Board of the Collaborative Centre, including representation of people with lived experience of mental illness or psychological distress, families and supporters. 	Mid 2022	Director, System Architecture and Planning
		<ul style="list-style-type: none"> Establishment of the Collaborative Centre, with joint leadership from a clinical academic and person with lived experience of mental illness or psychological distress. Establishment of advisory and guidance structures for the Collaborative Centre and its Board that include experience of co-occurring mental illness and substance use or addiction and their families, carers and supporters. 	Late 2022 Early 2023	
		<ul style="list-style-type: none"> Consensus between the Collaborative Centre and the new statewide service for people living with mental illness and substance use or addiction (see recommendation 36) on respective roles and responsibilities particularly in relation to research and workforce development functions. The Collaborative Centre will support the new Statewide Service to drive integrated care and deliver better outcomes for people with co-occurring needs. 	Late 2023	

<p>Recommendation 2: Establish a Mental Health and Wellbeing Promotion Office to deliver economic and social benefits of good mental health across the population through actions that are informed by public health principles, promotes human rights, and focus on reducing inequities in mental health and wellbeing outcomes.</p>	<p>The new Mental Health and Wellbeing Promotion Office will lead the development and coordination of a statewide approach to mental wellbeing promotion to improve accountability, coordination and planning of activities, including the development of a Victorian Wellbeing Plan.</p> <p>This plan will outline a cross-sector approach to support people's mental health and wellbeing, while recognising the interdependencies of mental health and other public health issues such as harm from alcohol and other drugs.</p>	<ul style="list-style-type: none"> Establish the Mental Health and Wellbeing Promotion Office in the Department of Health's Mental Health and Wellbeing Division, including an expert advisory committee to advise on the development and delivery of Wellbeing in Victoria – A Plan to Promote Good Mental Health (Wellbeing Plan). The Expert Advisory Committee will comprise two members with lived and living experience of substance use or addiction as a consumer and family member of people who use alcohol and other drugs. Engage with community, sector and government stakeholders to develop the Wellbeing Plan, including identification of priorities and system architecture to support effective implementation. Engagement will occur from July to November 2022 and involve representatives from the AOD sector, people with lived and living experience of substance use or addiction and AOD prevention-focused organisations. 	<p>July to November 2022</p>	<p>Mental Health and Wellbeing Promotion Advisor</p>
<p>Recommendation 4(3): establish legislated Regional Mental Health and Wellbeing Boards.</p>	<p>Regional Mental Health and Wellbeing Boards will promote integrated mental health and wellbeing and AOD treatment, care and support by advising the Minister on service needs within their respective regions and supporting collaboration between service providers.</p>	<ul style="list-style-type: none"> Interim Regional Bodies to build relationships with AOD service providers and commissioners to support a coordinated approach to the planning and coordination of treatment, care and support to people with co-occurring mental illness and substance use or addiction. At the passing and proclamation of the new <i>Mental Health and Wellbeing Bill 2022</i>, replace Interim Regional Bodies with legislated Regional Mental Health and Wellbeing Boards responsible for advising on workforce, service and capital planning for mental health and wellbeing services, including the delivery of integrated treatment, care and support. Consider intersections between Regional Mental Health and Wellbeing Board functions and AOD services, including workforce, service and capital planning. At the creation of enabling legislation Regional Mental Health and Wellbeing Boards are to plan, commission and performance monitor mental health and wellbeing services. 	<p>Mid 2022 – end 2023</p> <p>End 2023</p> <p>End 2023</p> <p>By end of 2026 (dependent on legislation)</p>	<p>Director, System Architecture and Planning</p>
<p>Recommendation 29: establish a new lived experience non-government agency (the agency).</p>	<p>The new agency will support the emergence of organisations led by people with lived and living experience of mental illness and psychological distress, including people with co-occurring substance use or addiction.</p> <p>The agency will also deliver mental health and wellbeing services to people with co-occurring mental illness and substance use or addiction and create opportunities for networking and collaboration.</p>	<ul style="list-style-type: none"> The Victorian Mental Illness Awareness Council and the Self Help Addiction Resource Centre to lead the co-design of the new agency, including the development of a skills-matrix to support the appointment of the Board of a new non-government organisation to establish the Agency. Appointment of a skills-based board to govern the agency, comprising a majority of people with lived experience of mental illness or psychological distress, including representation of people with co-occurring substance use or addiction. Implementation and delivery led by a majority of positions designated to people with lived experience of mental illness or psychological distress, including representation of people with co-occurring substance use or addiction. 	<p>Commencing mid 2022</p> <p>TBD</p> <p>TBD</p>	<p>Director, Lived Experience (Carer)</p>



2. New and reformed services

New and reformed services providing integrated treatment, care and support to people with co-occurring needs, their families and supporters

Recommendation	Implementing integrated treatment, care and support	Intersections with integrated treatment, care and support	Indicative timeline	Lead Director
<p>Recommendation 5 (interim report): Establish Victoria's first residential mental health service designed and delivered by people with lived experience.</p>	<p>The new service will be designed and delivered by people with lived experience and will operate as an alternative to acute hospital-based care.</p> <p>The new lived experience services will welcome people with co-occurring mental illness and substance use or addiction, providing integrated treatment, care and support.</p>	<ul style="list-style-type: none"> A two-staged co-design process for a 'healing model' for the lived experience residential service, including people with lived and living experience of mental illness or psychological distress and substance use or addiction. Stage one co-design of the service principles and key service elements identified the need to look to the AOD sector for lived-experience initiatives in the next stage of co-design, particularly how AOD peer work practice informs non-coercive practice. The stage one co-design report identified that the service needs to be inclusive of people who may be consuming alcohol and other drugs. Stage two co-design will explore how decision making will avoid deprioritising people who are seen as 'difficult' or 'complex' because of their substance use, and how support for safe alcohol and drug use can be incorporated into the service. 	<p>Stage one completed end 2021</p> <p>Stage two commencing mid 2022</p>	<p>Director, Lived Experience (Consumer)</p>
		<ul style="list-style-type: none"> Commission a non-government mental health community support service to work in partnership with an Area Mental Health and Wellbeing Service to finalise the 'healing model' for the new lived experience residential service. The model, expected to be operational by end of 2023 will deliver integrated treatment, care and support to people with co-occurring mental illness and substance use or addiction. 	TBD	
		<ul style="list-style-type: none"> Independent evaluation of the lived experience residential service to ensure it is delivering on its original intent and improving the outcomes and experiences of people with mental illness, including people with co-occurring substance use or addiction. 	TBD	
<p>Recommendation 4 (interim report): expand social and emotional wellbeing teams throughout Victoria, to be supported by a new Aboriginal Social and Emotional Wellbeing Centre.</p> <p>Recommendation 33: establish two co-designed healing centres for Aboriginal Victorians.</p>	<p>Aboriginal Social and Emotional Wellbeing teams are being expanded across all 25 Aboriginal Community Controlled Health Organisations (ACCHOs). These multidisciplinary teams comprise mental health clinicians, lived experience workers, cultural experts and workers with other specialist expertise relevant to the needs of their local communities, including AOD workers. They are being delivered within a holistic framework that is aligned with Aboriginal concepts of social and emotional wellbeing, including support for the use of alcohol and other drugs.</p> <p>The newly established Aboriginal Social and Emotional Wellbeing Centre – the Balit Durn Durn Centre – will support ACCHOs to deliver culturally safe and appropriate treatment, care and support. The Balit Durn Durn Centre will also share research and best practice in relation to social and emotional wellbeing. Two new co-designed</p>	<ul style="list-style-type: none"> Publication of a joint implementation plan led by the Department of Health and Victorian Aboriginal Community Controlled Health Organisation (VACCHO) outlining our shared vision for Aboriginal social and emotional wellbeing and how we will get there. 	End 2022	<p>Director, Aboriginal Social and Emotional Wellbeing</p>
		<ul style="list-style-type: none"> Expansion of Aboriginal and Social and Emotional Wellbeing teams across 25 ACCHOs to achieve statewide coverage within five years (including the four lapsing demonstration sites established through Balit Murrup). 	2025	
		<ul style="list-style-type: none"> Co-design of two healing centres, to be led by the Balit Durn Durn Centre and Aboriginal community-controlled health organisations and Aboriginal communities. Services will be designed to welcome people with co-occurring needs. Timelines and scope are subject to co-design processes which will be led by VACCHO. 	End 2022	

	healing centres will be an important part of this picture.			
<p>Recommendation 3 (interim report): expand the Hospital Outreach Post-suicidal after Engagement (HOPE) program.</p> <p>Recommendation 27(3)(final report): develop an intensive 14-day support program for adults who are experiencing psychological distress.</p>	<p>Services and supports are being designed and delivered to support people experiencing suicidal behaviour, including people experience co-occurring mental illness and substance use or addiction, including:</p> <ul style="list-style-type: none"> statewide expansion of the HOPE program, providing a follow-up and aftercare service for people who attend an emergency department in crisis or following a suicide attempt; and a new intensive 14-day support program for adults experiencing psychological distress, providing community-based problem-solving support and wellness, distress management planning and connections to other services. 	<ul style="list-style-type: none"> Co-design activities to inform the design and development of the 14-day brief distress intervention program. 	2022	State Suicide Prevention and Response Adviser
		<ul style="list-style-type: none"> Pilot of Brief Distress Intervention Program in one metropolitan and regional area, providing integrated treatment, care and support to people with co-occurring needs who are experiencing psychological distress. 	End 2022	
		<ul style="list-style-type: none"> The co-design process for four Child and Youth HOPE services has been completed and the four services are all operating. 	Complete	
		<ul style="list-style-type: none"> Explore opportunities to upskill and build the integrated care capability of the HOPE and suicide prevention and response workforce to better meet the needs of people with co-occurring mental health illness and substance use or addiction and expand access pathways between HOPE programs and AOD specialist services. 	TBD	
<p>Recommendation 3(2)(a): Establish Local Adult and Older Adult Mental Health and Wellbeing Services (Local Services).</p>	<p>Up to 60 new Local Services will provide a welcoming front door to the public mental health and wellbeing system where people first access support.</p> <p>Local Services will operate in accordance with a Service Framework that includes a requirement to deliver integrated treatment, care and support to people with co-occurring mental illness and substance use or addiction.</p>	<ul style="list-style-type: none"> A Service Framework created to guide the operation and service delivery of Local Services, including key service features and functions of the service model and operational requirements. The needs of people with a co-occurring mental illness and substance use or addiction will be fully integrated into all service components and the overall delivery model for a Local Service. 	Mid 2022	Director, Statewide Programs and Implementation
		<ul style="list-style-type: none"> The first three Local Services to commence operation (sites 1-3), with integrated mental health and wellbeing and AOD treatment, care and support fully integrated into all service components. 	Mid 2022	
		<ul style="list-style-type: none"> Local Services sites 4-6 to commence operation, with integrated mental health and wellbeing and AOD treatment, care and support fully integrated into all service components. 	End 2022	
		<ul style="list-style-type: none"> The department has an evaluation strategy for mental health that sets out the parameters for evaluation of Local Services. This will be used to guide the development of an evaluation framework. The evaluation will determine whether Local Services have been effectively implemented, achieved the intended consumer, carer and system impacts and outcomes and to identify areas for improvement. 	Ongoing	
		<ul style="list-style-type: none"> The Service Framework provides guidance on the referral pathways between Local Services, Area Services and other specialist services, including AOD services. Continuity of care for people who need to move between the different levels of the mental health and wellbeing other service systems will be supported by a future triage classification scale as well as local protocols and processes developed by Local Services providers with interfacing services. 	Guidance complete Triage TBD	
		<ul style="list-style-type: none"> All 50-60 Local Services established, with integrated mental health and wellbeing and AOD treatment, care and support integrated into all service components. 	End 2026	
<p>Recommendation 3(2)(b) Establish 22 Adult and Older Adult Area Mental Health and Wellbeing Services.</p>	<p>Adult and Older Adult and Infant, Child and Youth Area Mental Health and Wellbeing Services (Area Services) are being established and reformed, with their capacity and scope of practice expanded to deliver integrated treatment, care and support to people with co-occurring mental illness and substance use or addiction.</p> <p>All Area Services are developing Transformation Plans which will set out how</p>	<ul style="list-style-type: none"> Area Services will create Transformation Plans which will, by end 2022, include the delivery of integrated treatment, care and support to people with co-occurring mental illness and substance use or addiction. The Department of Health will support planning for the delivery of integrated mental health and wellbeing and AOD treatment, care and support, including identifying necessary resources and enablers. 	End 2022	Director, South East (Mental Health and AOD System Management) and Director, Service System Design 1
		<ul style="list-style-type: none"> Guidance will be developed to support Area Services in making appropriate arrangements for the use of primary and secondary consultation. 	TBD	
		<ul style="list-style-type: none"> Ongoing monitoring and tracking of progress of Area Services in delivering better outcomes for people with co-occurring mental illness and substance use or addiction, as outlined in their transformation plans and consistent with the new Mental Health and Wellbeing Outcomes and Performance Framework (recommendations 1 and 49). 	Ongoing	

	they plan to, or are already delivering on eight priorities, of which integrated mental health and wellbeing and AOD treatment, care and support is one. Transformation Plans will form the key accountability mechanism to monitor progress in achieving better outcomes for people with co-occurring mental illness and substance use or addiction accessing care via Area Services.			
Recommendation 3(2)(c) + Recommendation 20.1 Establish 13 Infant, Child and Youth Area Mental Health and Wellbeing Services. Establish a dedicated service stream for young people that delivers the core functions of community mental health and wellbeing services.	As described above, Infant, Child and Youth Area Services are being established and reformed, with their capacity and scope of practice expanded so that Victorians receive the right type, intensity and duration of treatment to achieve good clinical and wellbeing outcomes. There will be two dedicated service streams for: <ul style="list-style-type: none"> infants, children and their families from birth to 11 years young people aged 12-25 years. Infant, Child and Youth Area Services will deliver integrated treatment, care and support to young people with co-occurring mental illness and substance use or addiction.	<ul style="list-style-type: none"> Area Services will create Transformation Plans which will, by end 2022, set out the delivery of integrated treatment, care and support to young people with co-occurring mental illness and substance use or addiction. The Department of Health will support planning for the delivery of integrated mental health and wellbeing and AOD treatment, care and support, including identifying necessary resources and enablers. 	End 2022	Director, South East (Mental Health and AOD System Management and Director, Service System Design 2
Recommendation 8(3)(c): improve emergency departments' ability to respond to mental health crises by ensuring there is at least one highest-level emergency department suitable for mental health and alcohol and other drug treatment in each region.	All crisis and emergency services will provide integrated treatment, care and support to people with co-occurring mental illness and substance use or addiction. In addition, emergency department mental health and AOD hubs will be available in each of the eight regions. To date, emergency department mental health and AOD hubs have been established in: Sunshine Hospital, Barwon Health's University Hospital Geelong and St Vincent's Hospital Melbourne. AOD workers will be embedded in each of the hubs as part of a multidisciplinary team, delivering integrated assessments, brief interventions, peer support, referrals and post discharge planning.	<ul style="list-style-type: none"> Emergency department mental health and AOD hubs established providing integrated responses to mental health, substance use or addiction and physical needs at <ul style="list-style-type: none"> Sunshine Hospital, University Hospital Geelong and St Vincent's Hospital (2022) Monash Medical Centre (2022) Royal Melbourne Hospital (2024) Footscray Hospital, Frankston Hospital and Latrobe Regional Hospital (2025) 	2022	Director Health Capital Programs, Victorian Health Building Authority
		<ul style="list-style-type: none"> Capital planning funding to support the establishment of an additional three emergency department mental health and AOD hubs at Ballarat Base Hospital, Bendigo Hospital, and Goulbourn Valley Health to ensure there is one hub per region, as per the Royal Commission's recommendation. 	2023	Director, Mental Health, Infrastructure Planning, Health Infrastructure Division
		<ul style="list-style-type: none"> Ensure emergency department mental health and AOD hubs models of care are aligned with the Guidance planning, design, implementation and ongoing performance monitoring. 	2026	Director, Service System Design
Recommendation 15: support good mental health and wellbeing in local communities by establishing Social Inclusion	Social Inclusion Action Groups – to be determined. Social Prescribing trials will be established in the first six Local Services.	<ul style="list-style-type: none"> Co-design social prescribing experience for the mental health and wellbeing context. Inclusive of co-designers with experiences of substance use and addiction. 	May – July 2022	Mental Health and Wellbeing Promotion Advisor

<p>Action Groups for mental health and wellbeing in each local government area, support each community collective to bring together a diversity of local leaders and community members to guide and lead efforts to promote social connection and inclusion in Victorian communities and test and develop a range of initiatives that support community participation, inclusion and connection</p> <p>Recommendation 15.4 establish one social prescribing trial per region in Local Services to support healthcare professionals to refer people, particularly older Victorians, living with mental illness, into community initiatives.</p>		<ul style="list-style-type: none"> Implement social prescribing trials in the first six Local Services. Aligned with commencement of the first six Local Services. Evaluate social prescribing trials and make recommendations to government about social prescribing's value and any continued role in the reformed mental health and wellbeing system. 	<p>2022</p> <p>2023- 2026</p>	
<p>Recommendation 23: Establish a new Statewide Trauma Service to drive exemplary practice for trauma-informed care across the mental health and wellbeing system. The Statewide Trauma Service will part of the new Collaborative Centre (recommendation 1 interim report).</p>	<p>The new Statewide Trauma Service (STS) will:</p> <ul style="list-style-type: none"> bring together people with lived experience of trauma, researchers and other experts, and multidisciplinary clinical and non-clinical workforces to support the planning and delivery of translational research. develop and deliver education and training that supports the mental health and wellbeing workforce to deliver trauma-informed integrated treatment, care and support. Co-design online peer-led support programs with people with lived experience of trauma to offer moderated and facilitated online peer support for trauma. Coordinate and where needed, directly design and deliver a range of holistic trauma-informed treatment, care and support options for people with complex conditions and who have a high level of need. 	<ul style="list-style-type: none"> Establishment of the new STS via appointment of a consortia to deliver the key functions of the STS including co-design of the initial operating model with a broad range of stakeholders, including people with lived experience of trauma. The STS will be work collaboratively with a diversity of perspectives and experiences (including people who have a co-occurring mental illness and substance use or addiction) across all aspects of organisational and service planning, design, operations, and evaluation. The STS will collaborate with a range of services, organisations, and systems that work with people affected by trauma, including those who may also have a co-occurring mental illness and substance use or addiction. Co-design of the STS' full service specifications in late 2023 (aligned with recommendation 6: access and referral pathways) will include service planning, including the design and development of referral policies and pathways and the specialist trauma practitioner role. STS will foster collaborative partnerships in the planning, delivery and evaluation of its key functions and services. This could include working in partnership with the new statewide service for people living with mental illness and substance use or addiction (recommendation 36) to strengthen and complement the work of each service and ensure a coordinated response across core functions (particularly research and training and education functions). STS to design and deliver a trauma education and training program to build the capability of the mental health and wellbeing workforce to understand and work with people impacted by trauma, including people with co-occurring and mental illness and substance use or addiction. STS to co-design and deliver online peer-led trauma support networks that are run by people with lived and living experience of trauma. The co-design of the online platforms will include people with lived and living experience of trauma and co-occurring mental illness and substance use or addiction. 	<p>End 2022</p> <p>End 2023</p> <p>Mid 2023</p> <p>Mid 2023</p> <p>End 2023</p>	<p>Director, Service Design 2</p>
<p>Recommendation 31(1): Establish one family-carer-led centre in each of the eight regions.</p>	<p>New family-carer-led centres (centres) will provide families and supporters with tailored information, increased funds for immediate practical need, peer support groups and</p>	<ul style="list-style-type: none"> Tandem to lead the development of the structure and service delivery model for the centres, co-designed alongside families, carers and supporters, including families, carers and supporters of people with co-occurring mental illness and substance use or addiction. Commission eight metropolitan and regional providers to deliver the centres with service delivery model that is inclusive of families, carers and supporters of people with co-occurring mental 	<p>Co-design completed June 2022</p>	<p>Director, Lived Experience (Carer)</p>

	<p>access to supports to meet their own unique needs.</p> <p>The centres will be inclusive of families and supporters of people with co-occurring mental illness and substance use or addiction.</p>	<p>illness and substance use or addiction and ensure that ongoing co-design with that target group occurs.</p> <ul style="list-style-type: none"> Establish connections between the new centres and existing AOD family supports, including Family Drug and Gambling Help (Self Help Addiction Resource Centre). 		
<p>Recommendation 36: Establish a new statewide service for people living with mental illness and substance use or addiction (the Statewide Service) and increase the number of addiction specialists.</p>	<p>The new Statewide Service will support the mental health and wellbeing and AOD systems through capability building to provide integrated treatment, care, and support to people with co-occurring mental illness and substance use or addiction.</p>	<ul style="list-style-type: none"> Turning Point (as the Lead Provider) to lead the development of a model of care for the Statewide Service in co-design with Partner Providers (addiction services) and other key stakeholders, ensuring consistency of care and equal access across the state. The model of care will be consistent with the Guidance and outline primary and secondary consultation referral pathways to Partner Providers. 	July 2022	<p>Director, Mental Health and AOD Strategy and Policy</p>
		<ul style="list-style-type: none"> Turning Point to commence operations as the new Statewide Service and deliver on its core functions to build the capacity of mental health and wellbeing and AOD services to deliver integrated treatment, care and support. Turning Point will work in partnership with the Collaborative Centre upon its establishment in late 2023 (interim recommendation 1) particularly in relation to translational research and workforce development. 	End 2022	
		<ul style="list-style-type: none"> Turning Point will lead a consultation process with people with lived and living experience, service providers and workers to inform the delivery of the Statewide Service and the development of a roadmap that outlines a phased approach to service reform and offerings over time. This work will influence how referral pathways are established and expanded for both the Lead and Partner Providers of the Statewide Service (as outlined at recommendation 6(1)(2)(3)). 	End 2022	
		<ul style="list-style-type: none"> The Statewide Service to launch foundational e-learning training and face-to-face education initiatives to build the integrated care capabilities of the mental health and wellbeing and AOD workforces. Additional foundational training and more advanced topics will be added to the program of work overtime, starting from mid-2023. 	End 2022	
		<ul style="list-style-type: none"> Four Partner Providers (addiction services) established to facilitate statewide access to specialist care via: <ul style="list-style-type: none"> primary consultations to people with the highest-intensity substance use or addiction needs and co-occurring mental illness, and secondary consultations to support and build the capacity of the mental health and wellbeing and AOD workforce in providing integrated care. Turning Point will provide operational oversight of a new intake and coordination system for the Statewide Service, working in collaboration working with Partner providers to ensure triage and referral processes are working seamlessly. 	Early 2023	
		<ul style="list-style-type: none"> The Statewide Service will support the growth of Victoria's addiction specialist workforce by establishing dedicated training positions within each Partner Provider for both Addiction Medicine and Addiction Psychiatry Specialists. 	Early 2023	
		<ul style="list-style-type: none"> The Statewide Service, in collaboration with people with lived and living experience, workers and service providers, will review existing tools and identify a range of preferred integrated screening tools for use in different settings that inform preliminary needs assessment, including the current intensity of a person's co-occurring needs. 	Start 2023	
		<ul style="list-style-type: none"> Additional Partner Providers (addiction services) established to enhance statewide access to addiction specialists across the eight regions. 	Mid 2025	



3. System coherence

Clear pathways and information sharing within and across the mental health and wellbeing and AOD systems

Recommendation	Implementing integrated treatment, care and support	Intersections with integrated treatment, care and support	Indicative timeline	Lead Director
<p>Recommendation 6(1)(2)(3): Establish access and referral pathways to and between Local Services, Area Services and Statewide Services.</p>	<p>The overarching framework for reception, triage, intake, treatment, care and support, discharge, supported referrals, and co-operative care across the three tiers of the mental health and wellbeing system will include access and referral pathways to and from the specialist AOD system and referral pathways for primary and secondary consultation.</p>	<ul style="list-style-type: none"> Development of a system design approach to join together new and existing mental health and wellbeing settings and services across Local Services, Area Services and Statewide Services. This will include consideration of pathways to and from the specialist AOD system and referral pathways for primary and secondary consultation. Review program and service models to ensure fidelity to system design. 	<p>End 2026</p>	<p>Director, Service Design 1</p>
<p>Recommendation 61(1): develop policies, standards and protocols to enable the effective, safe and efficient collection and sharing of mental health and wellbeing information.</p>	<p>Mental health and wellbeing and AOD services will need to safely and efficiently share information to provide timely, coordinated, trauma-informed support to people with co-occurring mental illness and substance use or addiction. This will be particularly important for the provision of high-quality consultation services across systems, and when people move between systems as their needs change.</p>	<ul style="list-style-type: none"> Delivery of the foundational Data Review (62.1b) which will inform the design of the contemporary information architecture outlined in Recommendation 62. 	<p>End 2022</p>	<p>Director, Outcomes, Evidence and Performance</p>
<p>Recommendation 62: develop, fund and implement modern infrastructure for Information and Communications Technology (ICT) systems.</p>	<p>The delivery of integrated mental health and wellbeing and AOD treatment, care and support will be considered as Victoria develops a contemporary mental health and wellbeing information infrastructure, comprising:</p> <ul style="list-style-type: none"> a statewide electronic Mental Health and Wellbeing Record providing a single view of a consumer's critical mental health information a mental health and wellbeing information and data exchange to support integrated mental health and wellbeing services an online portal for Victorians experiencing mental illness or psychological distress to support personalised and integrated mental health and wellbeing services. 	<ul style="list-style-type: none"> A new electronic statewide Mental Health and Wellbeing Record will be developed and will require the defining and capturing of integrated care relevant data fields. People with co-occurring needs will be engaged and interoperability with AOD services considered in the development of the Mental Health Information and Data Exchange and online consumer portal. 	<p>July 2031</p>	<p>Lead Adviser, Commissioning and Service Improvement Division</p>



4. Capability

Capability planning to ensure all workers and services can offer treatment, care and support that is valued by people with co-occurring needs and their families and supporters

Recommendation	Implementing integrated treatment, care and support	Intersections with integrated treatment, care and support	Indicative timeline	Lead Director
Recommendation 3(5): establish the requirements for each service and the links between them through a 'service capability framework.'	A new Mental Health and Wellbeing Service Capability Framework will describe the minimum clinical services different organisations can provide and the workforce, infrastructure, equipment and clinical and non-clinical governance arrangements required to ensure consumer safety and high quality care.	• Develop a new capability framework for the Victorian mental health and wellbeing clinical system. The framework will describe the existing mental health and wellbeing clinical services and the complexity of care they can deliver.	Mid 2023	Director, System Architecture and Planning
		• Develop an implementation plan for the framework.	Mid- late 2023	
		• Review and ensure ongoing iterations of the Framework reflect reforms as they are implemented.	Ongoing	
Recommendation 57: Ensure that the range of expanded mental health and wellbeing services is delivered by a diverse, multidisciplinary mental health and wellbeing workforce of the necessary size and composition across Victoria.	Both the mental health and wellbeing workforce and the AOD workforce will need to expand in size and diversify in capabilities to deliver integrated mental health and wellbeing and AOD treatment, care and support. Existing and predicted workforce supply challenges for both sectors, which will be exacerbated by planned mental health and wellbeing service expansion, must be addressed to ensure that there is adequate size, diversity and distribution of workforces to meet the needs of people with co-occurring substance use or addiction. Victoria's mental health and wellbeing workforce strategy 2021- 2024 <https://www.health.vic.gov.au/strategy-and-planning/mental-health-workforce-strategy> provides a strategic approach to achieve a sustainable mental health and wellbeing workforce. Victoria's Alcohol and Other Drugs Workforce Strategy 2018-2022 <https://www.health.vic.gov.au/publications/victorias-alcohol-and-other-drugs-workforce-strategy-2018-2022> is set to expire in 2022.	• \$372 million in the 2022-23 State Budget to support workforce initiatives in attraction, training, wellbeing and capability. This is on top of the \$228 million investment in building and supporting the workforce in the previous two Budgets.	Underway	Director, Mental Health and AOD Workforce Strategy and Planning
		• The 2022-23 State Budget includes supporting more than 1500 jobs to deliver on the priorities outlined in the Mental Health and Wellbeing Workforce Strategy 2021-2024. The Department of Health is investing to build and support the workforce with funding for more than 100 psychiatry registrars, more than 400 mental health nurses, more than 300 psychologists and more than 600 allied health clinicians. These positions are being allocated now with training and support program that will need to align with the capabilities set out in the Mental Health and Wellbeing Capability Framework (recommendation 58(2)(3)).		
		• Workforce incentives are being offered in 2022 to attract practitioners with the most advanced skills to ensure care for people with the most complex needs to rural and regional areas.	• Accelerated training program for addiction psychiatry with four trainees to participate in an 18 month program. The program will build the pipeline of addiction psychiatrists to deliver specialist integrated treatment, care and support and secondary consultation to build the integrated care capability of workers.	August 2022 – January 2024
• Development of a new Victorian Alcohol and Other Drugs Workforce Strategy, setting the future directions for workforce development, planning and supply of the AOD workforce. The strategy will respond to the impact of reforms, including best practice for integrated mental health and wellbeing and AOD treatment, care and support.			TBD	Director, Mental Health and AOD Workforce Strategy and Planning And Director, Mental Health and AOD Policy and Strategy
Recommendation 58(2)(3): The future mental health and wellbeing workforce must develop a Victorian Mental Health and Wellbeing Workforce Capability Framework and detail the approach to capability development as part of the workforce strategy and implementation plan.	The future mental health and wellbeing workforce must be equipped with the skills, knowledge and attitudes to meet people's co-occurring mental illness and substance use or addiction needs through an integrated approach to treatment, care and support. The Victorian Mental Health and Wellbeing Workforce Capability Framework <https://www.health.vic.gov.au/strategy-and-planning/mental-health-workforce-strategy> identifies 'understanding and responding to substance use or	• Establishment of an implementation advisory group to provide advice to the Department of Health on the implementation of the Mental Health and Wellbeing Workforce Capability Framework. Membership of the group to include relevant skills and expertise in integrated mental health and wellbeing and AOD treatment, care and support.	July 2022	Director, Mental Health and AOD Workforce Strategy and Planning
		• An integrated care capability pilot being led by First Step and 11 services is testing the implementation of the Comprehensive Continuous Integrated System of Care model. The final report from this pilot will provide insight into how the pilot could be scaled and service and on workforce development approaches to enabling integrated treatment, care and support.	November 2022	
		• Development of an implementation plan that outlines the steps required to operationalise the Mental Health and Wellbeing Workforce Capability Framework and support the mental health and wellbeing workforce to meet the needs of people with co-occurring mental illness and substance use or addiction.	2022	

addiction' as one of 15 priority capability domains, representing a key area of practice for the mental health and wellbeing workforce.	<ul style="list-style-type: none"> Development of a Victorian Alcohol and Other Drug Workforce Capability Framework that articulates the knowledge and skills required of the AOD workforce, including capabilities required to support people with co-occurring mental illness and substance use or addiction. 	2023	Director, System Architecture and Planning and Director, Mental Health and AOD Workforce Strategy and Planning
	<ul style="list-style-type: none"> Development of tools and resources to support the practical application of the Mental Health and Wellbeing Workforce Capability Framework among the mental health and wellbeing workforce, including a focus on building the integrated-care capability of workers. 	2023	
	<ul style="list-style-type: none"> The Collaborative Centre (interim report recommendation 1) will support capability building of the workforce, in collaboration with training providers, mental health and wellbeing services, the new Statewide Service for people with co-occurring needs (recommendation 36) and people with lived and living experience. 	Late 2023	



5. Resourcing, performance and accountability

Sufficient resourcing and outcomes-oriented funding and performance monitoring to ensure people with co-occurring needs and their families and supporters experience high quality services

Recommendation	Implementing integrated treatment, care and support	Intersections with integrated treatment, care and support	Indicative timeline	Lead Director
<p>Recommendation 1(1): develop a Mental Health and Wellbeing Outcomes Framework.</p> <p>Recommendation 49: establish a new performance monitoring and accountability framework.</p>	<p>To help us understand if our new approach to integrated treatment, care and support is working, a new Mental Health and Wellbeing Outcomes and Performance Framework is being developed.</p> <p>The new framework will include specific outcomes and key performance indicators related to the delivery of integrated mental health and wellbeing and AOD treatment, care and support. It will help drive accountability for better outcomes and experiences of people with co-occurring mental illness and substance use or addiction, their families and supporters.</p>	<ul style="list-style-type: none"> A series of 11 workshops involving people with lived experience, including people with co-occurring mental illness and substance use or addiction, and sector representatives, including the Self Help and Addiction Resource Centre, to inform the design and development of the Mental Health and Wellbeing Outcomes and Performance Framework. 	Mid 2022	Director, Outcomes, Evidence and Performance
		<ul style="list-style-type: none"> Broad community engagement activities to be undertaken via the Engage Victoria platform to inform the design and development of the Mental Health and Wellbeing Outcomes and Performance Framework. 	August – October 2022	
		<ul style="list-style-type: none"> Release of the new Mental Health and Wellbeing Outcomes and Performance Framework, including a strategy for implementation from 2023. The framework will include specific outcomes and indicators related to integrated mental health and wellbeing and AOD treatment, care and support. Outcome's measurement design and implementation planning will also consider how outcome measurement can occur in the specialist standalone AOD system. Design and implementation planning will be informed by the Guidance. 	End 2022	
		<ul style="list-style-type: none"> Make any necessary adaptations to performance monitoring and accountability arrangements for AOD services (i.e., the AOD program guidelines) in line with relevant integrated care outcomes and indicators established in the new Mental Health and Wellbeing Outcomes and Performance Framework. 	Mid 2023	
		<ul style="list-style-type: none"> Publicly report on the new Mental Health and Wellbeing Outcomes and Performance Framework, measuring progress against outcomes at a service, system and population level and driving accountability for improving the outcomes for people with co-occurring mental illness and substance use or addiction. 	End 2023 (annually)	
<p>Recommendations 47(1) and (2): Establish a process for assessing the Victorian population's need for mental health and wellbeing services; and develop and publish a statewide mental health, AOD and wellbeing service and capital plan and eight regional mental health and wellbeing service and capital plans.</p>	<p>These recommendations aim to ensure that Victorian mental health and wellbeing services can keep pace with demand and deliver the right kinds of support – including for people with co-occurring mental illness and substance use or addiction.</p> <p>The first Statewide plan will consider current and future need for both the mental health and wellbeing and AOD service systems. This will further be developed in 2023 when regional service and capital plans are developed.</p>	<ul style="list-style-type: none"> Health Infrastructure are undertaking asset condition assessments of 73 facilities across the state. The outcome will assist in informing system planning across the state for both current and future infrastructure. 	End 2022	Director, System Architecture and Planning
		<ul style="list-style-type: none"> System Reform and Planning are undertaking Area Service demand modelling and forecasting. Demand modelling to be conducted in collaboration with Nous Group and UNSW looking at state community mental health and AOD (tertiary and non-tertiary). This will include use of the UNSW Drug and Alcohol Services Planning Model method for AOD services. 	September 2022	
		<ul style="list-style-type: none"> Complete service mapping across the state across the six levels identified by the Royal Commission. 	September 2022	
		<ul style="list-style-type: none"> Engage with and listen to people with lived and living experience, ensuring the expertise of consumers, families and supporters are at the centre of the development and testing of plan progress to ensure delivery of the first statewide service and capital plan. Engagement will be conducted through the Nous group engagement framework. Note that lived experience engagement is limited to employed lived experience groups due to ethics considerations. 	September 2022	
		<ul style="list-style-type: none"> Publish the first statewide mental health, AOD and wellbeing service and capital plan by end of 2022. Publish eight Regional Mental Health, AOD and Wellbeing Service and Capital plans 	End 2022 End 2023	

<p>Recommendation 48(3)(a): develop new ways of funding providers that encourage the provision of mental health and wellbeing services that consumers, families and supporters value and result in an equitable allocation of resources through an activity-based funding model.</p>	<p>The Department of Health is developing new funding approaches for mental health and wellbeing services, with funding allocations to be based on the activities service providers undertake and report on, and consistent with whole-of-system policy settings.</p> <p>Development of new funding approaches will include identifying, measuring and costing all existing and new mental health and wellbeing services that form integrated treatment, care and support for consumers, families, carers and supporters.</p>	<ul style="list-style-type: none"> • Following from service and capital planning (recs 47(1) and (2)), model design across various settings, and performance and outcomes (rec 1(1) and 49), and service capability framework (rec 3(5)), consider how new expectations of services should be reflected in the new activity-based funding model including: <ul style="list-style-type: none"> ○ general service offerings provided to people with co-occurring mental illness and substance use or addiction which may take an integrated approach at the practice level, such as talk therapies ○ service offerings provided specifically for people with co-occurring mental illness and substance use or addiction in mental health settings, such as withdrawal or harm reduction ○ consultation services provided to people with co-occurring mental illness and substance use or addiction in AOD settings. 	<p>TBD</p>	<p>Project Director, Funding Reform</p>
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In this document, 'Aboriginal' refers to both Aboriginal and Torres Strait Islander people. 'Indigenous' or 'Koori/Koorie' is retained when part of the title of a report, program or quotation.

Available at the [Department of Health website](https://www.health.vic.gov.au/mental-health-reform/recommendation-35) <https://www.health.vic.gov.au/mental-health-reform/recommendation-35>