

Queensland Mental Health Commission

Strategic Plan 2024–2028

Our vision

Queenslanders working together
to improve health and wellbeing

Our purpose

Drive ongoing reform towards a more integrated, evidence-based,
recovery-oriented mental health, alcohol and other drugs,
and suicide prevention system in Queensland

Who we are

The Queensland Mental Health Commission (the Commission) was established on 1 July 2013 by the *Queensland Mental Health Commission Act 2013* (the Act).

The Commission’s role is to drive ongoing reform towards a more integrated, evidence-based, recovery-orientated mental health, alcohol and other drugs, and suicide prevention system in Queensland. The Act sets out the Commission’s functions, which underpin the Strategic Plan and program of work.

As an agency in the health portfolio, the Commission works alongside the Department of Health while retaining its independence as a statutory body. It reports through the Mental Health Commissioner directly to the Minister for Health, Mental Health and Ambulance Services and Minister for Women and receives advice and recommendations from the Queensland Mental Health and Drug Advisory Council.

The Commission sets whole-of-government mental health, alcohol and other drugs, and suicide prevention policy through *Shifting minds: The Queensland Mental Health, Alcohol and Other Drugs, and Suicide Prevention Strategic Plan 2023–2028*, and its supporting plans *Every life: The Queensland Suicide Prevention Plan 2019–2029 (Every life Phase Two)*, and *Achieving balance: The Queensland Alcohol and Other Drugs Plan 2022–2027 (Achieving balance)*.

Our commitment to First Nations peoples

The Commission respectfully acknowledges Aboriginal and Torres Strait Islander people as the traditional custodians of Queensland’s land and seas. We recognise that it is our collective effort and responsibility as individuals, communities and governments to ensure equality, recognition and advancement of Aboriginal and Torres Strait Islander Queenslanders across all aspects of society and everyday life. We are committed to supporting the Queensland Government’s First Nations reform agenda, including the *Path to Treaty* and commitments under the *National Agreement on Closing the Gap*. We are committed to walking together on our shared journey of Reconciliation.

Our commitment to people with lived experience

The Commission is committed to achieving better lives and outcomes for people living with mental illness, problematic alcohol and other drugs use, and those impacted by suicide, as well as their families and support people. We are committed to promoting and embedding lived experience leadership within a mental health, alcohol and other drugs, and suicide prevention system that is evidence-based, person-centred, trauma-informed and supportive of human rights. We respect, protect and promote human rights in everything we do.

Our challenges

- **Reform influence:** The Commission actively works across government and other sectors to progress the development and implementation of the whole-of-government strategic plan and subplans, requiring collaborative relationships with all relevant State Government agencies and key stakeholders.
- **Governance:** The ability of the Commission to perform effectively and efficiently in a complex environment with finite resources requires robust governance and accountability systems.
- **Expectations:** The Commission ensures we have the capacity and capability to meet community and sector expectations and achieve our strategic goals within allocated resources.
- **Increased demand:** The Commission considers and responds to the impact of COVID-19, natural disasters, and other challenging experiences on people’s mental health and wellbeing, and the increased demand for service delivery and reform.
- **Workforce:** The Commission examines workforce challenges and identifies policy settings that support the broader health and human service systems to recruit, retain and develop an appropriate workforce to meet the broad needs of the sector.





Queensland Government objectives for the community

 <div>Safety where you live</div> <div>Making Queensland safer.</div>	 <div>A better lifestyle through a stronger economy</div> <div>Growing our economy to drive down the cost of living and give Queenslanders a better lifestyle and place to call home.</div>	 <div>Health services when you need them</div> <div>Restoring health services when Queenslanders need them most.</div>	 <div>A plan for Queensland’s future</div> <div>Planning for Queensland’s future.</div>
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Our opportunities

- Enhance prevention and health promotion, and address social determinants and health equity so all Queenslanders can reach their highest level of health and wellbeing.
- Elevate the role of lived experience in policy, planning, service delivery and evaluation, including people living with mental-ill health, alcohol and other drug issues, those at risk of suicide, and other vulnerable populations, as well as their families, carers and kin.
- Refresh the reform agenda through implementation of a renewed *Shifting minds 2023–2028*, *Every life Phase Two* and *Achieving balance*.
- Promote community-based service delivery, prevention and early intervention as essential elements of reform.
- Strengthen cross-sector partnership, collaboration and investment in mental health, alcohol and other drugs, and suicide prevention beyond the Department of Health.

Queensland Mental Health Commission Strategic Plan 2024–2028

Objectives	Strategies	Indicators
<p>The wellbeing of Queenslanders is promoted and supported</p> <p>Mental health and wellbeing is better understood, maintained and proactively supported in Queensland communities.</p> 	<ul style="list-style-type: none"> • Support and promote strategies that facilitate early detection and intervention, focusing on areas of increased risk and priority populations. • Strengthen mentally healthy environments including educational settings, workplaces and communities. • Build and facilitate the inclusion of prevention and promotion into public policy. • Advance individual, community, and government education and awareness to reduce stigma and discrimination. 	<ol style="list-style-type: none"> 1. Satisfaction with Commission initiatives to improve mental health and wellbeing. 2. Satisfaction with Commission initiatives to reduce stigma and discrimination.
<p>System reform is supported and advanced</p> <p>Reform effort is coordinated and integrated across the mental health, alcohol and other drugs, suicide prevention and related systems.</p> 	<ul style="list-style-type: none"> • Act as a system steward to review the current system and identify opportunities for improvement. • Lead, build, plan and deliver strategic partnerships to support cross-government policies, priorities and implementation. • Facilitate strategic whole-of-government forums to coordinate action. • Collaborate and co-design reform with a variety of key stakeholders. • Enable and build the capability for system change. 	<ol style="list-style-type: none"> 1. Increase in cross-agency and non-government organisation (NGO) partnerships facilitated by the Commission. 2. Stakeholders view positive reform to be underway.
<p>Policy and practice is grounded in evidence and best-practice</p> <p>Best-practice and knowledge translation is embedded in the mental health, alcohol and other drugs, and suicide prevention systems to improve quality and performance.</p> 	<ul style="list-style-type: none"> • Share best-practice with key agencies to continuously improve programs and processes. • Pilot programs to test and refine innovative solutions to key challenges. • Identify opportunities to improve and integrate data across programs and the broader system. • Embed monitoring and evaluation into programs. • Provide input and submissions to relevant inquiries and reports. • Conduct research to promote contemporary approaches and build the knowledge base. 	<ol style="list-style-type: none"> 1. Increase in the number of Commission submissions, research and evaluation reports.
<p>Lived-living experience, and First Nations expertise drives system reform</p> <p>Lived, living and First Nations experience is embedded in governance.</p> 	<ul style="list-style-type: none"> • Drive and strengthen opportunities for lived and living experience, and First Nations leadership and expertise across governance, coordination and implementation. • Ensure the voices of priority populations and those experiencing greater inequity inform and lead reform activities. 	<ol style="list-style-type: none"> 1. Increase in lived and living experience, and First Nations representation on governance groups. 2. Stakeholders view that the Commission's work is informed by people with a lived and living experience and families and carers.