

# OPERATIONAL PLAN 2016–2017



<b>OUR PURPOSE</b> Drive ongoing reform towards a more integrated, evidence-based, recovery oriented mental health, drug and alcohol system within Queensland.	<b>OUR VISION</b> A healthy and inclusive community where people experiencing mental health difficulties or issues related to substance use have a life with purpose and access to quality care and support focused on wellness and recovery, in an understanding empathic and compassionate society.	<b>RESOURCES</b> Budget of \$8.7 million <b>STAFFING</b> 18 FTE
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## SERVICE DELIVERY PERFORMANCE: In 2016–2017 the Commission will undertake activities in its Service Delivery Statement

Continue its work in facilitating the implementation of the <i>Queensland Mental Health, Drug and Alcohol Strategic Plan 2014-2019</i> and associated whole-of-government action plans. A review will also be commenced on the Strategic Plan.	Develop and release other priority action plans identified in the Strategic Plan including the Aboriginal and Torres Strait Islander social and emotional wellbeing action plan and the rural and remote mental health and wellbeing action plan.	Increase community awareness of mental health issues including through increased participation in Mental Health Week and World Suicide Prevention Day activities.	Support research into ways to reduce stigma experienced by people living with mental illness and problematic alcohol and drug use including stigma which impacts on the ability to gain and retain employment.	Support a third year of the Stronger Community Mental Health and Wellbeing grants program.	Support localised approaches to suicide prevention in collaboration with Primary Health Networks.	Provide input into the implementation of the <i>Mental Health Act 2016</i> with a focus on ensuring the principles in the Act are reflected in practice.
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## OUR PRINCIPLES<sup>1</sup>

People with a mental illness or who misuse substances should have access to quality mental health and substance misuse services which espouse their rights to respect, dignity and privacy.	Aboriginal and Torres Strait Islander people should be provided with treatment, care and support in a way that recognises and is consistent with Aboriginal tradition or Island custom and culture.	Carers, family members and support persons for people with a mental illness or who misuse substances are integral to wellbeing, treatment and recovery; and should be respected, valued engaged and supported.	An effective mental health and substance misuse system is the shared responsibility of the government and non-government sectors and requires a coordinated and integrated approach.
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## VALUES

The public service values ‘Customers First, Ideas for Action, Unleash Potential, Be Courageous, Empower People and Promote Wellness’ are fundamental to all that we undertake.

## KEY RESULT AREAS (KRA)<sup>2</sup>

WHOLE OF GOVERNMENT STRATEGIC PLANNING	REVIEW, RESEARCH AND REPORT	AWARENESS AND PROMOTION	SYSTEMIC GOVERNANCE
The Commission is required to develop a whole-of-government strategic plan in consultation with consumers, families, carers, government and non-government stakeholders. The Commission’s role is to facilitate and report on the Strategic Plan’s implementation.	Undertaking reviews and research and preparing reports enables the Commission to provide advice to inform decision making, build the evidence base, support innovation and identify good practice.	The Commission has a key role in facilitating and promoting awareness, prevention and early intervention by supporting whole-of-government and whole-of-community action. Actions are linked to the Strategic Plan Shared Commitments to Action.	The Commission is responsible for establishing and supporting statewide systemic governance mechanisms that are collaborative, representative, transparent and accountable and operate in accordance with the Queensland Mental Health Commission Act 2013.
Key deliverables for 2016-17 include: <ul style="list-style-type: none"> <li>• Monitor, review and report on the Strategic Plan.</li> <li>• Monitor and support implementation of the Early Action, Suicide Prevention and Alcohol and other Drugs Action Plans.</li> <li>• Publish and support the Aboriginal and Torres Strait Islander and rural and remote communities’ action plans.</li> <li>• Supporting local actions to improve mental health and wellbeing.</li> </ul>	Key deliverables for 2016-17 include: <ul style="list-style-type: none"> <li>• Monitor and support improvements in individual advocacy and rights protection.</li> <li>• Monitor and support the implementation of the Ordinary Report in Social Housing recommendations.</li> <li>• Research and support better mental health service integration</li> <li>• Examine mental health system performance particularly in relation to service funding.</li> <li>• Research stigma and discrimination impacting AOD</li> <li>• Support actions to improve mental health and wellbeing within the criminal justice system.</li> </ul>	Key deliverables for 2016-17 include: <ul style="list-style-type: none"> <li>• Facilitate and promote whole-of-government actions to improve mental health awareness, prevention and early intervention, including developing and supporting:                             <ul style="list-style-type: none"> <li>– finalising perinatal mental health and wellness projects</li> <li>– continuing to support the Ed-linQ cross-sectoral workforce development project and commencing the implementation of a renewed Ed-linQ model</li> <li>– contribute to and coordinate the work of beyondblue in Queensland</li> <li>– the Regional Mental Health and Wellbeing Hubs Initiative</li> <li>– trial a mental health literacy quality and coordination model</li> <li>– cross-sectoral capacity building</li> <li>– enhanced Mental Health Week events coordination and promotion</li> <li>– social procurement outcomes</li> <li>– actions to improve the mental health and wellbeing of people in the criminal justice system</li> <li>– Aboriginal and Torres Strait Islander local empowerment through NEP.</li> </ul> </li> </ul>	Key deliverables for 2016-17 include: <ul style="list-style-type: none"> <li>• Providing support to the Queensland Mental Health and Drug Advisory Council.</li> <li>• Supporting participation and knowledge sharing including:                             <ul style="list-style-type: none"> <li>– the International Initiative for Mental Health Leadership Exchange</li> <li>– the lived experience forum as part of the IIMHL</li> <li>– emerging Aboriginal and Torres Strait Islander leaders in mental health to participate in the IIMHL.</li> </ul> </li> <li>• Supporting and facilitating consumer, family and carer engagement and leadership including:                             <ul style="list-style-type: none"> <li>– representation at the national level through the National Mental Health Consumer and Carer Forum</li> <li>– developing and publishing best practice principles on consumer, family and carer engagement and leadership</li> <li>– developing a plain language resource to support families and carers when an adverse event occurs</li> </ul> </li> </ul>

<sup>1</sup> Queensland Mental Health Commission Act 2013 (s5)

<sup>2</sup> Queensland Mental Health Commission Act 2013 (S11)

		<ul style="list-style-type: none"> <li>Facilitate and promote whole-of-government actions to reduce suicide and its impact, including supporting and where appropriate developing: <ul style="list-style-type: none"> <li>a community strengths based approach to suicide prevention</li> <li>pilot a project to deliver best practice support and follow up care training for Emergency Departments in suicide risk management</li> <li>develop tailored training and materials for CALD communities</li> <li>review the accessibility of support for people bereaved</li> <li>continue to support the maintenance and reporting on the Queensland Suicide Register</li> <li>develop and implement a Suicide Data and Information Sharing Network</li> <li>support the enhanced coordination and promotion of community events for World Suicide Prevention Day</li> <li>scope current service models, barriers for accessing services and options for improvement for Indigenous young people at risk of suicide in Townsville</li> <li>pilot a place-based approach.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>promoting the importance of the lived experience of mental illness in service planning and delivery.</li> <li>Supporting reform for people living with disabilities, including their participation in mental health sector discussions regarding the roll out of the NDIS in Queensland.</li> <li>Establishing and maintaining partnerships with major stakeholders.</li> </ul>
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CORPORATE GOVERNANCE (key focus)

Corporate governance compliance as a Statutory Body	Communications planning and implementation	Organisational effectiveness monitoring and reporting model
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KEY RISKS

EXPECTATIONS	REPUTATIONAL	GOVERNANCE	REFORM INFLUENCE
High and varied expectations of the Commission are held by stakeholders including consumers, families, carers and supporters, non-government agencies, the public and private sectors, academia and professional bodies. This will be managed through promoting the Commission's role, working collaboratively and regular communication.	Perceptions of the Commission as an independent body are essential to its credibility, reputation and capacity to affect change. This will be influenced by the quality of the Commission communication processes, particularly timely and transparent reporting of progress across all sectors.	The capacity of the Commission to perform effectively and efficiently in a complex environment with finite resources requires robust governance and management systems.	Commission’s ability to facilitate reform across government links closely with the first two risks and requires it to effectively monitor changing government priorities and maintain sound relationships with central agencies.