

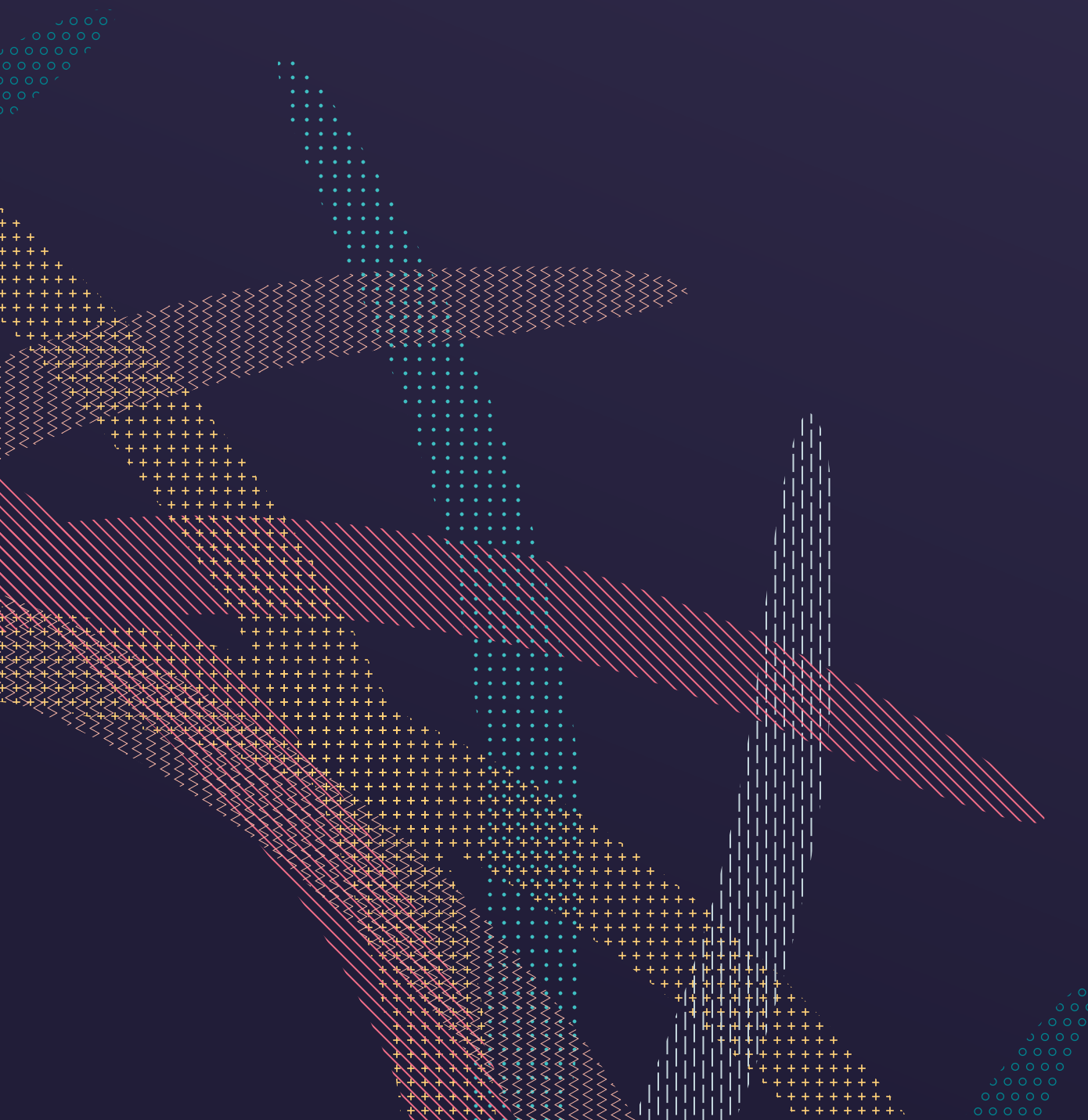


**Royal Commission into
Victoria's Mental Health System**

Final Report

Recommendations

Plain language version



**Royal Commission into
Victoria's Mental Health System**

Recommendations

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Recommendations

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The Royal Commission into Victoria's Mental Health System, Melbourne Victoria, authorised and published this document.

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This plain language report is a simplified version of the *Final Report*. The content and ideas presented in this report are similar, however, they are not the direct words of the Commissioners.

The images in this document only show models and examples of settings. They don't necessarily show actual services, facilities or participants. If the image is of a specific person or place, the document will say that. This document may include images of Aboriginal and Torres Strait Islander peoples who have died.

In this document, 'Aboriginal' means both Aboriginal and Torres Strait Islander peoples. We use 'Indigenous' or 'Koori/Koorie' when it's part of the title of a report, program or quote.

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Available at the Royal Commission into Victoria's Mental Health System website <www.rcvmhs.vic.gov.au>. If you have any questions about the Commission's work please contact the Department of Health <MentalHealth@dhhs.vic.gov.au>.

A note on content

The Royal Commission thanks everyone that contributed their personal stories and opinions to this inquiry. We particularly want to thank:

- people with lived experience of mental illness and psychological distress
- families, carers and supporters
- people who work in the mental health sector.

Some of these stories and the Commission's recommendations include information that could be distressing. You might want to think about how and when you read this report.

Aboriginal readers please note that this report may contain photos, quotes and names of people who have died.

If you're upset by any content in this report or if you or a loved one need support, these services may be able to help:

- if you're not in immediate danger but you need help, call **NURSE-ON-CALL** on **1300 60 60 24**
- for crisis support, contact **Lifeline** on **13 11 14**
- for support, contact **Beyond Blue** on **1300 224 636**
- if you're looking for a mental health service, visit the **Better Health Channel website** <www.betterhealth.vic.gov.au>
- **if you're in a situation that is harmful or life-threatening, contact emergency services immediately on triple zero (000).**

You can find a note on the words and terminology used in this document in the front of the Commission's Final Report.



Overview

Overview

- This document reproduces recommendations provided to Commissioners on 11 January.
- In addition, it includes:
 - minor subsequent changes requested by Bernadette for consistency
 - minor changes to address issues discussed by Commissioners on 12 January, including clarifications to recommendations 3, 24, 25 and 30 requested by Bernadette.
- Recommendations have been **reordered** to match the revised Final Report structure.
- Cross references to other recommendations within the text of recommendation have also been updated.



Recommendation 1:

Supporting good mental health and wellbeing

The Royal Commission recommends that the Victorian Government:

1. develop a *Mental Health and Wellbeing Outcomes Framework* to drive shared responsibility and accountability for mental health and wellbeing outcomes across government. This will build on the Interim Report's nine recommendations.
2. use the *Mental Health and Wellbeing Outcomes Framework* to check how well outcomes are doing and to help make planning and policy decisions. This will be done through the new Mental Health and Wellbeing Cabinet Subcommittee, chaired by the Premier (see recommendation 46(2)(a)).
3. use the *Mental Health and Wellbeing Outcomes Framework* as a way to help develop government investment processes and assess the benefits of early intervention. This includes economic benefits.
4. update the *Mental Health and Wellbeing Outcomes Framework* and reports on progress against outcomes to the public. The outcomes will be for services, the whole system and the population. The updating and reporting will happen every year.

Recommendation 2:

Management of promoting good mental health and preventing mental illness

The Royal Commission recommends that the Victorian Government:

1. set up a Mental Health and Wellbeing Promotion Office in the Mental Health and Wellbeing Division. This will be led by a Mental Health and Wellbeing Promotion Adviser who will report to the Chief Officer for Mental Health and Wellbeing (see recommendation 45(1)).
2. support the Mental Health and Wellbeing Promotion Office to develop and coordinate a statewide approach to promoting good mental health and wellbeing and preventing mental illness. This approach will:
 - a. provide economic and social benefits of good mental health and wellbeing across the population
 - b. be informed by public health principles
 - c. promote and be informed by human rights
 - d. focus on reducing inequalities in mental health and wellbeing outcomes.

Recommendation 3:

Establishing a responsive and integrated mental health and wellbeing system

The Royal Commission recommends that the Victorian Government:

1. set up a responsive and integrated mental health and wellbeing system. In this system, Victorians will receive most services locally and in the community. They will receive services close to their families, carers, supporters and networks.
2. set up service delivery across Victoria at local, area and statewide levels. There will be:
 - a. between 50 to 60 new Adult and Older Adult Local Mental Health and Wellbeing Services that are open for longer and are delivered in different ways
 - b. 22 Adult and Older Adult Area Mental Health and Wellbeing Services delivered through partnerships between public health services or public hospitals and non-government organisations that deliver wellbeing supports
 - c. 13 Infant, Child and Youth Area Mental Health and Wellbeing Services delivered through partnerships between public health services or public hospitals and non-government organisations that deliver wellbeing supports
 - d. statewide services that are delivered so that people don't have to travel far to access services, if possible
3. change existing boundaries and organise mental health and wellbeing services across eight regions. This is for planning and ways of managing. (See recommendation 4.)
4. removes strict boundaries (or catchments) for service delivery based on where people live.
5. sets up the requirements for each service and the links between them through a 'service capability framework'.

Recommendation 4:

Towards integrated regional management

The Royal Commission recommends that the Victorian Government:

1. by mid-2021, establish eight interim regional bodies. These will advise the Mental Health and Wellbeing Division in the Department of Health as it plans, develops, coordinates, funds and monitors mental health and wellbeing services in each region.
2. by no later than the end of 2023, replace temporary regional bodies with Regional Mental Health and Wellbeing Boards that are defined in legislation. These will:
 - a. do workforce, service and capital planning for mental health and wellbeing services
 - b. lead engagement with their communities.
3. from the end of 2023 and by no later than the end of 2026, support each Regional Mental Health and Wellbeing Board to:
 - a. commission mental health and wellbeing services
 - b. hold individual providers responsible for improving the outcomes and experiences of people who use their services.
4. at the same time as it's setting up the boards, make sure that Regional Mental Health and Wellbeing Boards:
 - a. get and maintain the skills and capabilities needed to do the functions outlined in points 2 and 3
 - b. are held responsible for delivering agreed outcomes through new accountability arrangements
 - c. have members chosen because of their skills. They must include at least one person with lived experience of mental illness or psychological distress. They must also include at least one person with lived experience as a family member or carer.
5. with the help of the temporary regional bodies, set up a multiagency panel in each region. Where it's needed, these panels will coordinate the delivery of multiple mental health and wellbeing services for people living with mental illness or psychological distress who may need ongoing intensive treatment, care and support. This includes children and young people.

Recommendation 5:

Core functions of community mental health and wellbeing services

The Royal Commission recommends that the Victorian Government:

1. commission Adult and Older Adult Local Mental Health and Wellbeing Services and Adult and Older Adult Area Mental Health and Wellbeing Services – see recommendation 3(2)(a) and (b). The Government should also make sure these services work together to deliver short-term, ongoing and intensive services as needed. They should deliver the following core functions in all 22 service areas:
 - a. Core function 1: integrated treatment, care and support that is made up of:
 - a wide range of treatments and therapies
 - a wide range of wellbeing supports for those who need them, including people who are unable to access the National Disability Insurance Scheme
 - education, peer support and self-help
 - care planning and coordination.
 - b. Core function 2: services to help people find and access treatment, care and support. In Area Mental Health and Wellbeing Services, services will respond to crises 24 hours a day, seven days a week.
 - c. Core function 3: support for primary and secondary care and related services. This will be through primary consultation with consumers, secondary consultation with providers of those services and a formal model of complete shared care.
2. commission Adult and Older Adult Local Mental Health and Wellbeing Services and Adult and Older Adult Area Mental Health and Wellbeing Services – see recommendation 3(2)(a) and (b). The Government should also make sure these services work together to deliver multidisciplinary, holistic and integrated treatment, care and support. This will be through a range of ways including:
 - a. site-based care (such as centres or clinics)
 - b. telehealth
 - c. digital technologies
 - d. visits to people's homes and other places (including actively providing follow-up services in the community).
3. make sure Adult and Older Adult Local Mental Health and Wellbeing Services and Adult and Older Adult Area Mental Health and Wellbeing Services are accessible and responsive to the diversity of local communities.

Recommendation 6:

Helping people find and access treatment, care and support

The Royal Commission recommends that the Victorian Government:

1. make sure people can access Local Mental Health and Wellbeing Services through a referral from a general practitioner or any other service provider. Or access these services through talking with the relevant service's access and navigation support worker.
2. make sure people can access Area Mental Health and Wellbeing Services through a referral from a Local Mental Health and Wellbeing Service or through direct referral from a medical practitioner.
3. make sure people can access Statewide Mental Health and Wellbeing Services through a referral from an Area Mental Health and Wellbeing Service.
4. promote a website that provides clear, up-to-date information about Victoria's mental health and wellbeing system. The website will be created with support from people with lived experience. It will help users to:
 - a. understand their mental health needs
 - b. identify services and supports across all relevant providers
 - c. access online self-help resources.
5. work with the non-government helpline services it funds to improve helplines' connections with mental health and wellbeing services. As well as to help people find and access treatment, care and support.

Recommendation 7:

Working out what the needs are and providing initial support in mental health and wellbeing services

The Royal Commission recommends that the Victorian Government:

1. make sure mental health and wellbeing services provide three 'needs identification and initial support' functions:
 - a. access and navigation support
 - b. first support discussions
 - c. full needs assessment and planning discussions.
2. make sure these functions are delivered based on the question 'how can we help?'. This will help people get the support they need from their first contact to their last contact with mental health and wellbeing services.

Recommendation 8:

Responding to mental health crises

The Royal Commission recommends that the Victorian Government:

1. make sure each Adult and Older Adult Area Mental Health and Wellbeing Service delivers a centrally coordinated 24-hour telephone/telehealth crisis response service. This will be accessible to service providers and to members of the community of all ages. It will:
 - a. provide crisis assessment and immediate support
 - b. send out a crisis outreach team
 - c. start an emergency service response where needed
 - d. provide a referral for a follow-up by mental health and wellbeing services and other appropriate services.
2. expand crisis outreach services in each Adult and Older Adult Area Mental Health and Wellbeing Service to provide treatment, care and support from a clinician and non-clinical worker, such as a peer worker.
3. improve the ability of emergency departments to respond to mental health crises by:
 - a. setting up a way to classify all emergency departments and urgent care centres. Their classification will be based on their capability to respond to people experiencing mental health crises
 - b. using this way of classifying departments to make sure that health services have the right resources to do their job in a regional network of emergency departments and urgent care centres
 - c. making sure there's at least one highest-level emergency department suitable for mental health and alcohol and other drug treatment in each region.

Recommendation 9:

Developing 'safe spaces' and crisis respite facilities

The Royal Commission recommends that the Victorian Government:

1. invest in diverse and innovative 'safe spaces' and crisis respite facilities that resolve mental health and suicidal crises. These will be led by consumers. Where appropriate, they will be delivered in partnership with non-government organisations.
2. work with the new agency led by people with lived experience of mental illness or psychological distress (see recommendation 29) and with non-government organisations that deliver wellbeing supports, to set up:
 - a. one drop-in or crisis respite facility for adults and older Victorians per region (see recommendation 3(3))
 - b. four safe space facilities across the state, made up of drop-in spaces and crisis response services. These will be designed with and for young people.
3. set up a safe place where people in crisis can go to stabilise. This place will be set up in consultation with people with lived experience. It will be led by a public health service or public hospital in partnership with a non-governmental organisation that delivers wellbeing supports.

Recommendation 10:

Supporting responses from emergency services to mental health crises

The Royal Commission recommends that the Victorian Government:

1. make sure that, where possible, emergency services' responses to people experiencing mental health crises are led by health professionals instead of police.
2. support Ambulance Victoria, Victoria Police and the Emergency Services Telecommunications Authority to work together to revise current procedures. When it's possible and safe:
 - a. Triple Zero (000) calls about mental health crises will be redirected to Ambulance Victoria instead of Victoria Police
 - b. responses to mental health crises needing both ambulance and police are led by paramedics (with support from mental health clinicians where needed).
3. make sure that mental health clinical help is available to ambulance and police through:
 - a. 24-hour telehealth services for officers responding to mental health crises
 - b. in-person co-responders in busy areas and times
 - c. redirection of Triple Zero (000) callers who don't need the police or ambulance to secondary triage and referral services.

Recommendation 11:

New models of care for bed-based services

The Royal Commission recommends that the Victorian Government:

1. review, reform and put in place new models of multidisciplinary care for bed-based services. These services will be delivered in a range of settings, including in people's homes and in specialised community and hospital environments.
2. deliver a wide range of bed-based services. First, it needs to:
 - a. expand Hospital in the Home services that can be used instead of acute hospital-based treatment, care and support where appropriate
 - b. invest in a wide range of time-limited and flexible residential respite services that respond to local priorities. This includes setting up a peer-led residential respite service at a demonstration site
 - c. develop new bed-based rehabilitation services (see recommendation 12).
3. deliver at least 100 additional beds across Victoria. This will build on the Interim Report's recommendation 2, about the need to expand acute mental health services.
4. regularly review the distribution of new beds as part of the statewide and regional planning processes recommended by the Royal Commission (see recommendation 47). It will also review the outcomes.

Recommendation 12:

Developing new bed-based rehabilitation services

The Royal Commission recommends that the Victorian Government:

1. put in place the new whole-of-system rehabilitation pathway for people living with mental illness who need ongoing intensive treatment, care and support. The pathway will include two new bed-based rehabilitation models of care.
2. Design with consumers, clinicians and relevant non-government organisations and services:
 - a. the new community rehabilitation model of care and deliver it at a community care unit demonstration site
 - b. the new intensive rehabilitation model of care and deliver it at a secure extended care unit demonstration site.
3. after the models of care are assessed and possibly adapted, use them in existing community care and secure extended care units. The Government will improve and expand the units as needed.

Recommendation 13:

Addressing gender-based violence in mental health facilities

The Royal Commission recommends that the Victorian Government:

1. make sure that all new mental health inpatient facilities:
 - a. are built and designed so people can be separated by gender in all bedrooms and bathrooms
 - b. provide separate common spaces as needed.
2. by mid-2022, make sure that existing high dependency units in inpatient facilities make it possible to separate people by gender.
3. review and improve existing inpatient facilities as needed to:
 - a. achieve gender-based separation where possible
 - b. as a priority, make sure that each facility meets the minimum standards for gender safety set out in the Chief Psychiatrist's guideline: 'Promoting sexual safety, responding to sexual activity and managing allegations of sexual assault in adult acute inpatient units'.
4. make sure that the Mental Health and Wellbeing Division supports mental health and wellbeing services to end sexual and gender-based violence in bed-based service settings.

Recommendation 14:

Supporting mental health consultation liaison services

The Royal Commission recommends that the Victorian Government:

1. work with the Independent Hospital Pricing Authority and the Australian Government to:
 - a. make sure mental health consultation liaison services for consumers admitted for physical health reasons are formally recognised and properly funded as part of usual care. Mental health consultation liaison services provide consumers with advice about different services that will provide treatment, care and support
 - b. make sure mental health consultation liaison services are included, costed and priced in the relevant classifications and standards.
2. make sure public health services and public hospitals:
 - a. get enough temporary funding to include in-hospital mental health consultation liaison services as part of usual care until joint funding arrangements between the Australian and Victorian Governments are set up
 - b. are held responsible for delivering in-hospital mental health consultation liaison services and provide these services to consumers admitted for physical health reasons when needed
 - c. are held responsible for continuing high-quality integrated mental health treatment, care and support across the hospital system.

Recommendation 15:

Supporting good mental health and wellbeing in local communities

The Royal Commission recommends that the Victorian Government:

1. set up and regularly give enough resources to 'community collectives' for mental health and wellbeing in each local government area.
2. support each community collective to bring together a range of local leaders and community members to guide and lead efforts to promote social connection and inclusion in Victorian communities.
3. test and develop projects that support community participation, inclusion and connection.
4. by the end of 2022, set up one 'social prescribing' trial in each region (see recommendation 3(3)) in Local Mental Health and Wellbeing Services. A social prescribing trial will support healthcare professionals to refer people living with mental illness into community activities, particularly professionals will refer older Victorians.

Recommendation 16:

Setting up mentally healthy workplaces

The Royal Commission recommends that the Victorian Government:

1. as a project of the Mental Health and Wellbeing Cabinet Subcommittee (see recommendation 46(2)(a)):
 - a. ask for commitment from employers to create mentally healthy workplaces
 - b. advise on, develop and provide resources to help employers and employees in Victorian businesses to:
 - promote good mental health in workplaces
 - tackle workplace barriers to good mental health
 - promote inclusive workplaces that are free from stigma and discrimination
 - support people experiencing mental illness at work.
2. sponsor industry-based trials to show how to adapt and implement complete mentally healthy workplace approaches in an industry context.

Recommendation 17:

Supporting social and emotional wellbeing in schools

The Royal Commission recommends that the Victorian Government:

1. fund evidence-informed initiatives to help schools support students' mental health and wellbeing. This will include anti-stigma and anti-bullying programs.
2. make a digital platform that contains a list of these initiatives.
3. develop a fund to support schools to choose the best initiatives for them. This will be based on School Readiness Funding for kindergartens. Priority will be given to schools in rural and regional areas.

Recommendation 18:

Supporting the mental health and wellbeing of future and new parents

The Royal Commission recommends that the Victorian Government:

1. expand and reform the community perinatal mental health teams in each Adult and Older Adult Area Mental Health and Wellbeing Service across Victoria. Each service will be adapted to deliver the core functions set out in recommendation 5. This will include providing consultation to primary and secondary care and related services for future and new parents, like maternal and child health nurses.
2. review approaches to perinatal mental health screening.

Recommendation 19:

Supporting infant, child and family mental health and wellbeing

The Royal Commission recommends that the Victorian Government:

1. set up one responsive and integrated infant, child and youth mental health and wellbeing system to provide mental health and wellbeing treatment, care and support for newborns to 25-year-olds that suits their developmental stage.
2. by the end of 2022, set up a service stream for infants, children and their families in the 13 Infant, Child and Youth Area Mental Health and Wellbeing Services (see recommendation 3(2)(c)). These will consist of Infant, Child and Family Area Mental Health and Wellbeing Services, and will:
 - a. provide mental health and wellbeing treatment, care and support services for newborns to 11-year-olds and their families that suits the infant's or child's developmental stage
 - b. adapt and deliver the core functions of community mental health and wellbeing services (see recommendation 5). These will be delivered in different ways. Services will be accessible and responsive to the diversity of local communities.
3. by the end of 2022, set up three infant, child and family health and wellbeing multidisciplinary community-based hubs. The Victorian Government and Australian Government will do this together.
4. deliver online parenting programs and group-based parenting sessions based on evidence.
5. set up two statewide subacute residential family admission centres in the community. Subacute is a condition between acute and chronic.

Recommendation 20:

Supporting the mental health and wellbeing of young people

The Royal Commission recommends that the Victorian Government:

1. by the end of 2022, set up a service stream for young people in the 13 Infant, Child and Youth Area Mental Health and Wellbeing Services (see recommendation 3(2)(c)). It will consist of Youth Area Mental Health and Wellbeing Services, and will:
 - a. adapt and deliver the core functions of community mental health and wellbeing services set out in recommendation 5. These will be delivered in different ways. They will be accessible and responsive to the diversity of local communities
 - b. provide short-term and ongoing treatment, care and support to young people. This includes for people who need intensive treatment, care and support.
2. make sure Youth Area Mental Health and Wellbeing Services are available for young people aged 12 to 25 (until a person's 26th birthday). Services will apply age boundaries and transitions flexibly with young people and their families, carers and supporters.
3. support the development of formal partnerships between headspace centres and Infant, Child and Youth Area Mental Health and Wellbeing Services. This includes supporting 'step-up' and 'step-down' referral pathways, and sharing workers and infrastructure. It also includes supporting services to be located in the same place.
4. work with the Australian Government, headspace National and Primary Health Networks to make sure that Infant, Child and Youth Area Mental Health and Wellbeing Services become the preferred providers of headspace centres in Victoria.

Recommendation 21:

Redesigning bed-based services for young people

The Royal Commission recommends that the Victorian Government:

1. review, reform and implement new models of multidisciplinary care for bed-based services for young people. This is for services delivered in different settings, including in young people's homes and in specialised community and hospital environments.
2. deliver a wide range of bed-based services, including these top priorities:
 - a. making sure every region has a Youth Prevention and Recovery Centre for young people aged 16 to 25, supported through a common and consistent model of care
 - b. creating a new stream of inpatient beds across Victoria for young people aged 18 to 25 by reorganising existing inpatient beds for adults and using the 100 new beds referred to in recommendation 11(3)
 - c. making sure Hospital in the Home services are available for young people to use instead of acute hospital-based treatment, care and support where appropriate.
3. formally review the Youth Residential Rehabilitation Program. This will be done in consultation with young people, and with families, carers and supporters.

Recommendation 22:

Supporting the mental health and wellbeing of older Victorians

The Royal Commission recommends that the Victorian Government:

1. set up a responsive and integrated mental health and wellbeing service stream for older Victorians. The stream will focus on improving their mental health and wellbeing outcomes.
2. make sure older Victorians have access to the same mental health treatment, care and support as other adults.
3. set up older adult mental health and wellbeing specialist multidisciplinary teams in Adult and Older Adult Area Mental Health and Wellbeing Services (see recommendation 3(2)(b)). These will:
 - a. provide specialist mental health treatment, care and support for people with complex and worsening mental health needs related to ageing
 - b. help primary and secondary care and related services that support older Victorians, including aged care, through primary consultation, secondary consultation and shared care.

Recommendation 23:

Setting up a new Statewide Trauma Service

The Royal Commission recommends that the Victorian Government:

1. by the end of 2022, set up a Statewide Trauma Service. This will deliver the best possible mental health and wellbeing outcomes for people of all ages with lived experience of trauma. It will be within in the Collaborative Centre for Mental Health and Wellbeing,
2. fund the Statewide Trauma Service to bring together mental health practitioners, trauma experts, peer workers and consumers with lived experience of trauma. They will:
 - a. do multidisciplinary and translational trauma research. Translational research is a type of work that tries to bridge the gap between basic research and putting it into practice
 - b. develop and deliver education and training that supports Victoria's mental health and wellbeing workforce to give trauma-informed care
 - c. develop and oversee digital peer-led support platforms that offer consumers access to peer support networks
 - d. coordinate and ease access to specialist trauma expertise. This includes secondary consultation for mental health professionals and peer workers in Victoria's mental health and wellbeing system.

Recommendation 24:

A new approach to addressing trauma

The Royal Commission recommends that the Victorian Government:

1. working with the Statewide Trauma Service (see recommendation 23), support each of the 22 Adult and Older Adult Area Mental Health and Wellbeing Services and each of the 13 Infant, Child and Youth Area Mental Health and Wellbeing Services (see recommendation 3(2)(b) and (c)) to employ up to three specialist trauma practitioners. They will:
 - a. work with peer support workers in Local Mental Health and Wellbeing Services to provide and ease access to a wide range of trauma supports for consumers of all ages and backgrounds
 - b. contribute to the ongoing learning and professional development of the mental health and wellbeing workforce. They will do this by providing supervision, consultation and shared clinical care.

Recommendation 25:

Supported housing for adults and young people living with mental illness

The Royal Commission recommends that the Victorian Government:

1. recognise that people who are living with mental illness need to be a priority group in Victoria's 10-year strategy for social and affordable housing. As well as make sure that, during the next 10 years, a significant amount of social and affordable housing still goes to people living with mental illness.
2. update the Victorian Housing Register's Special Housing Needs 'priority access' categories. This is so that they include people living with mental illness and those who need ongoing intensive treatment, care and support.
3. make sure that the 2,000 homes for Victorians living with mental illness in the Big Housing Build are built as supported housing. They should also make sure people living with mental illness who need ongoing intensive treatment, care and support are first in line for these homes. Area Mental Health and Wellbeing Services will help to choose the people most in need.
4. invest in an extra 500 new supported housing places for young people who are living with mental illness and have unstable housing or are experiencing homelessness. These places should be medium-term, meaning up to two years, and for people aged 18 to 25 years.
5. make sure that the supported housing homes for adults and young people living with mental illness are:
 - a. available in a range of different housing set-ups including:
 - stand-alone units
 - self-contained units with shared facilities
 - groups of independent units on a single property.
 - b. in suitable locations and meet the needs of people living with mental illness
 - c. co-designed by Homes Victoria representatives that the Mental Health and Wellbeing Division and people with lived experience of mental illness have appointment
 - d. supported by integrated, multidisciplinary and individual mental health and wellbeing treatment, care and support.
6. regularly review how they assign supported housing and assess the outcomes. This should be part of the statewide and regional planning processes the Royal Commission recommended (see recommendation 47).

Recommendation 26:

Management of suicide prevention and response efforts

The Royal Commission recommends that the Victorian Government:

1. set up a Suicide Prevention and Response Office in the Mental Health and Wellbeing Division. A State Suicide Prevention and Response Adviser should lead this office. They would report to the Chief Officer for Mental Health and Wellbeing (see recommendation 45(1)).
2. support the Suicide Prevention and Response Office to:
 - a. set up a system-based approach to suicide prevention and responses
 - b. work with people with lived experience of suicidal behaviour; family members and carers; and people with lived experience of bereavement by suicide. Working together, they will produce, start and monitor a new suicide prevention and response strategy for Victoria
 - c. work closely with the Australian Government to make sure suicide prevention and response in Victoria work well alongside national processes
 - d. manage a community-wide and government-wide approach to suicide prevention and response
 - e. work within management structures that include all government departments and relevant agencies, with Deputy Secretary and Secretary level membership
 - f. employ people with lived experience of suicidal behaviour; family members and carers; and people with lived experience of bereavement by suicide.

Recommendation 27:

Managing suicide prevention and response initiatives

The Royal Commission recommends that the Victorian Government:

1. build on the Interim Report's recommendation 3 on suicide prevention and response. Develop programs to support people experiencing suicidal behaviour including:
 - a. training for members of workforces likely to come in contact with people experiencing suicidal behaviour on how to respond
 - b. free, online 'community gatekeeper training' to develop suicide awareness and prevention skills in the Victorian community
 - c. supporting Aboriginal people to design culturally safe 'community gatekeeper training' for Aboriginal people
 - d. supporting Victorian industries and businesses to invest in workplace suicide prevention and response programs. To begin with, this should focus on forming partnerships with high-risk industries.
2. develop programs to support people at risk of experiencing suicidal behaviour, by:
 - a. working with people with lived experience on an aftercare service for lesbian, gay, bisexual, trans and gender diverse, intersex, queer and questioning (LGBTIQ+) people after a suicide attempt
 - b. in partnership with the Australian Government, starting statewide postvention bereavement support. This will mean that every person bereaved by suicide is automatically referred to a postvention bereavement provider. Postvention is the support, such as counselling, given to family and friends after the loss of a loved one from suicide.
3. develop an intensive 14-day support program for adults who are experiencing psychological distress, modelled on Scotland's Distress Brief Intervention Program.

Recommendation 28:

Developing roles across the system for people with lived experience of mental illness or psychological distress

The Royal Commission recommends that the Victorian Government:

1. develop key roles across the mental health and wellbeing system for people with lived experience of mental illness or psychological distress. These roles are on top of the roles listed in other recommendations.
2. support the Mental Health and Wellbeing Commission (refer to recommendation 44) to:
 - a. support people with lived experience of mental illness or psychological distress to take part and take a lead role in making decisions about policies and programs. This is particularly important for the policies and programs that directly affect them
 - b. develop and support the leadership skills of people with lived experience of mental illness or psychological distress
 - c. design and deliver programs to prevent and tackle stigma towards people living with mental illness or psychological distress
 - d. design and deliver programs to improve awareness and understanding of the experiences and points of view of people with lived experience of mental illness or psychological distress.

Recommendation 29:

A new agency led by people with lived experience of mental illness or psychological distress

The Royal Commission recommends that the Victorian Government:

1. build on the Interim Report's recommendation 5 to set up a new non-government agency. The board that oversees this agency will be mainly made up of people with lived experience of mental illness or psychological distress. The agency will:
 - a. deliver accredited training and resources to support developing organisations led by people with lived experience of mental illness or psychological distress
 - b. develop and deliver mental health and wellbeing services led by people with lived experience of mental illness or psychological distress
 - c. support organisations led by people with lived experience of mental illness or psychological distress to share resources, locations and learning opportunities with each other. As well as support them to create new partnerships and networks.

Recommendation 30:

Developing involvement of family members and carers across the system

The Royal Commission recommends that the Victorian Government:

1. develop key roles across the mental health and wellbeing system for people with lived experience as family members and carers. These roles are on top of the roles listed in other recommendations,
2. support the Mental Health and Wellbeing Commission (see recommendation 44) to:
 - a. support family members and carers of people living with mental illness or psychological distress to take a lead role and promote their value throughout the mental health and wellbeing system
 - b. develop and support the leadership and management skills of families and carers of people living with mental illness or psychological distress.
3. make sure that:
 - a. in setting up mental health and wellbeing services, expectations are set for working with families, carers and supporters
 - b. families, carers and supporters are included in a range of therapeutic interventions in each Area Mental Health and Wellbeing Service
 - c. working with families, carers and supporters is part of workforce training across the system.
4. develop standards for services and specialists on how to share appropriate information with families, carers and supporters. This is on top of reforms to improve information sharing explained in other recommendations.

Recommendation 31:

Supporting families, carers and supporters

The Royal Commission recommends that the Victorian Government:

1. by the end of 2022, give money to non-government organisations to provide a family and carer-led centre in each of the eight regions (see recommendation 3(3)). These centres will:
 - a. provide personalised information and supports for families, carers and supporters in the region
 - b. work with families, carers and supporters to work out what they need and connect them to the supports that will best meet those needs
 - c. provide access to more funds for immediate practical needs such as short-term respite
 - d. support family and carer peer support groups in the region.
2. set up a statewide peer call-back service for families, carers and supporters caring for people experiencing suicidal behaviour.
3. make sure there is tailored information for families, carers and supporters, such as on the new statewide mental health website (see recommendation 6(4)).

Recommendation 32:

Supporting young carers

The Royal Commission recommends that the Victorian Government:

1. by the end of 2022, fund a non-government organisation to work with young people to design and expand the supports for young carers and children and young people who have a family member living with mental illness or psychological distress. These supports will be available across Victoria. An organisation like the Satellite Foundation could lead this work.
2. by the end of 2022, increase the scale and reach of the Families where a Parent has a Mental Illness program. This should include:
 - a. supporting each Area Mental Health and Wellbeing Service to employ new workers to support young carers in their local area
 - b. increasing the funding available to young carers to help with practical needs.
3. improve how young carers are identified and referred through the mental health and education systems.

Recommendation 33:

Supporting Aboriginal peoples' social and emotional wellbeing

The Royal Commission recommends that the Victorian Government:

1. build on the Interim Report's recommendation 4 to support Aboriginal peoples' social and emotional wellbeing. Resource the Social and Emotional Wellbeing Centre to set up two healing centres that are designed with input from Aboriginal people.
2. fund Infant, Child and Youth Area Mental Health and Wellbeing Services to support Aboriginal community-controlled health organisations. Services can do this by providing primary consultation, secondary consultation and shared care.
3. fund Aboriginal community-controlled health organisations to organise culturally appropriate, family-oriented, social and emotional wellbeing services for children and young people.
4. fund the Victorian Aboriginal Community Controlled Health Organisation to work with an Infant, Child and Youth Area Mental Health and Wellbeing Service. Together they will design and set up a culturally appropriate, family-oriented service for infants and children who need intensive social and emotional wellbeing supports.

Recommendation 34:

Working in partnership with and improving accessibility for diverse communities

The Royal Commission recommends that the Victorian Government:

1. make sure they actively engage with Victoria's diverse communities throughout planning, implementing and managing the new mental health and wellbeing system.
2. make it law that the Secretary of the Department of Health is responsible for delivering a mental health and wellbeing system that meets the needs of Victoria's diverse communities and supports access and equal outcomes. The Secretary can delegate this responsibility to the Chief Officer for Mental Health and Wellbeing (see recommendation 45(1)).
3. make sure that the Mental Health and Wellbeing Division:
 - a. collects, analyses and reports on data on the mental health and wellbeing of Victoria's diverse communities. This will support planning and funding and help improve transparency in mental health and wellbeing outcomes for diverse communities
 - b. makes sure that Victorians, no matter what their first or preferred language, hearing, literacy or neurocognitive ability is, have access to mental health and wellbeing information. As well as support and ways they can communicate throughout the mental health and wellbeing system
 - c. supports Victoria's diverse communities and community-led organisations to:
 - design and deliver mental health and wellbeing information and awareness campaigns
 - help their communities to navigate the mental health and wellbeing system.
4. by the end of 2021, provide ongoing funding to Switchboard Victoria to deliver its Rainbow Door program. This program supports people who identify as LGBTIQ+ to navigate and access the mental health and wellbeing system.
5. develop digital technologies to deliver language services that help people access and engage with mental health and wellbeing services.

Recommendation 35:

Improving outcomes for people living with mental illness and substance use or addiction

The Royal Commission recommends that the Victorian Government:

1. by the end of 2022, make sure that all mental health and wellbeing services, for all age groups, including crisis services, community-based services and bed-based services:
 - a. provide integrated treatment, care and support to people living with mental illness and substance use or addiction
 - b. don't stop people living with substance use or addiction from accessing treatment, care and support.

Recommendation 36:

A new statewide service for people living with mental illness and substance use or addiction

The Royal Commission recommends that the Victorian Government:

1. set up a new statewide specialist service, based on the Victorian Dual Diagnosis Initiative, to:
 - a. research mental illness and substance use or addiction
 - b. support education and training for a range of mental health and alcohol and other drug specialists and clinicians
 - c. provide primary consultation to people living with mental illness and substance use or addiction who have complex support needs
 - d. provide secondary consultation to mental health and wellbeing and alcohol and other drug specialists and clinicians across both sectors.
2. as a priority, increase the number of addiction specialists (addiction medicine physicians and addiction psychiatrists) in Victoria.
3. work with the Australian Government to look for opportunities for funded addiction specialist trainee positions in Victoria.

Recommendation 37:

Supporting the mental health and wellbeing of people in contact with, or at risk of coming into contact with, the criminal and youth justice systems

The Royal Commission recommends that the Victorian Government:

1. expand the Assessment and Referral Court to each of the 12 headquarter Magistrates' Courts to meet demand.
2. expand the existing forensic community model – a service delivery model for people with serious mental illness involved with the criminal justice system. This model should be expanded to:
 - a. support all age specific Mental Health and Wellbeing Services to provide consistent treatment, care and support to people in contact with, or at risk of coming into contact with, the criminal justice system
 - b. set up the specialist behaviour response team described by the Royal Commission in its Final Report.
3. set up a program to move the supports for people in prison living with mental illness to mainstream mental health and wellbeing services when they're released.
4. expand specialist youth forensic mental health programs to a statewide model. This includes across the 13 Infant, Child and Youth Area Mental Health and Wellbeing Services (see recommendation 3(2)(b) and (c)). So that they provide consistent treatment, care and support to children and young people in contact with, or at risk of coming into contact with, the youth justice system.

Recommendation 38:

Providing safe and appropriate mental health treatment, care and support at Thomas Embling Hospital

The Royal Commission recommends that the Victorian Government:

1. in line with the plan for Thomas Embling Hospital and the suggestion of the Victorian Health and Human Services Building Authority:
 - a. refurbish the existing 136 beds
 - b. by the end of 2026, provide an extra 107 beds. A small number of these beds should be for people living with mental illness whose treatment, care and support needs can't be safely met in acute inpatient settings or through the forensic community model (see recommendation 37(2)).
2. provide up to 20 beds for people living with mental illness whose treatment, care and support needs can't be, or are unlikely to be, safely met in other extended rehabilitation places. This is on top of the 107 beds mentioned above.

Recommendation 39:

Supporting the mental health and wellbeing of people in rural and regional Victoria

The Royal Commission recommends that the Victorian Government:

1. as well as making sure rural and regional communities get the benefits of the Royal Commission's recommended mental health and wellbeing system:
 - a. provide extra resources to support mental health and wellbeing services in regional Victoria to deliver services to small or isolated rural communities
 - b. by the end of 2022, trial two new digital service delivery programs in rural and regional areas that meet the needs of local communities.

Recommendation 40:

Providing incentives for the mental health and wellbeing workforce in rural and regional areas

The Royal Commission recommends that the Victorian Government:

1. focus on mental health and wellbeing workforce needs in rural and regional areas and set up an incentive scheme to:
 - a. attract mental health and wellbeing workers to rural and regional services
 - b. keep mental health and wellbeing workers in these services.

Recommendation 41:

Addressing stigma and discrimination

The Royal Commission recommends that the Victorian Government:

1. fund and support the Mental Health and Wellbeing Commission (see recommendation 44) to work with a network of partners to design and deliver anti-stigma programs that:
 - a. are long term
 - b. reduce the impact of stigma in a range of settings like healthcare settings, workplaces and schools.
2. design and deliver an anti-stigma grants program to:
 - a. support community-led organisations and community members to deliver projects that challenge stigma in Victoria
 - b. focus as a priority on communities and social groups at higher risk of stigma.
3. evaluate anti-stigma projects to:
 - a. develop evidence about effective ways to address mental health stigma in Victoria
 - b. inform how anti-stigma programs are designed and delivered.
4. support and set up ways to:
 - a. tackle system-wide issues of mental health discrimination
 - b. improve access to legal protection for people facing mental health discrimination
 - c. support one or two independent legal services with a connection to people with lived experience of mental illness or psychological distress to start legal claims. This includes test cases about system wide mental health discrimination.

Recommendation 42:

A new Mental Health and Wellbeing Act

The Royal Commission recommends that the Victorian Government:

1. end the Mental Health Act 2014 (Vic) and start a new Mental Health and Wellbeing Act. Preferably, this should be done by the end of 2021 and no later than mid-2022. The new Act will:
 - a. encourage good mental health and wellbeing
 - b. change the laws that support the mental health and wellbeing system
 - c. support delivering services that are responsive to the needs and preferences of Victorians.

2. make sure the new Mental Health and Wellbeing Act:
 - a. includes new objectives and mental health principles. Its main objective should be to reach the highest standard of mental health and wellbeing for the people of Victoria by:
 - promoting conditions that people can experience good mental health and wellbeing in
 - making access to, and the delivery of, mental health and wellbeing services more equal
 - providing a wide range of safe and high-quality mental health and wellbeing services.
 - b. makes the roles, responsibilities and management of the new mental health and wellbeing system clear
 - c. sets up the organisations and roles mentioned in other recommendations. This includes:
 - the Mental Health and Wellbeing Commission (see recommendation 44)
 - the Chief Officer for Mental Health and Wellbeing (see recommendation 45(1))
 - Regional Mental Health and Wellbeing Boards (see recommendation 4(2))
 - d. improves accountability processes and monitoring procedures for service delivery
 - e. lists ways to reduce rates and negative impacts of compulsory assessment and treatment, seclusion and restraint
 - f. simplifies and makes clear the statutory provisions, or laws, for compulsory assessment and treatment. So that it's clear that they are no longer the central feature of Victoria's mental health laws
 - g. lists the ways information about mental health and wellbeing can be collected and used.

Recommendation 43:

Future review of mental health laws

The Royal Commission recommends that the Victorian Government:

1. organise an independent review of Victoria's mental health laws five to seven years after the new Mental Health and Wellbeing Act is in place.
2. work with people with lived experience, families, carers and supporters to design the terms of reference for the review. The terms of reference should focus on making sure mental health laws are effective and meet people's needs and preferences.
3. as part of this review, look at the role of the Mental Health Tribunal and Chief Psychiatrist to make sure they are still appropriate.

Recommendation 44:

A new Mental Health and Wellbeing Commission

The Royal Commission recommends that the Victorian Government:

1. set up an independent statutory authority, the Mental Health and Wellbeing Commission, to:
 - a. hold government to account for the performance, quality and safety of the mental health and wellbeing system
 - b. support people living with mental illness or psychological distress, families, carers and supporters to lead and take part in the work to improve the system
 - c. check the Victorian Government's progress in applying the Royal Commission's recommendations
 - d. tackle stigma related to mental health.

2. make sure the Mental Health and Wellbeing Commission:
 - a. is led by a Chair Commissioner who a small group of Commissioners support. The Governor-in-Council will appoint all of the Commissioners
 - b. includes at least one Commissioner with lived experience of mental illness or psychological distress and one Commissioner with lived experience as a family member or carer.

3. support the Mental Health and Wellbeing Commission to:
 - a. get data and information from all government agencies about:
 - mental health and wellbeing service delivery
 - how the system is performing and outcomes
 - other relevant information

 - b. work with and share information with the Department of Health and other relevant organisations (for example, the Collaborative Centre for Mental Health and Wellbeing and Safer Care Victoria)
 - c. start its own inquiries into matters that support its objectives
 - d. handle and investigate complaints about mental health and wellbeing service delivery
 - e. make recommendations to the Premier, any minister and the heads of public service bodies
 - f. publish reports on the performance, quality and safety of the mental health and wellbeing system.

Recommendation 45:

Effective leadership of and accountability for the mental health and wellbeing system

The Royal Commission recommends that the Victorian Government:

1. set in law the role of Chief Officer for Mental Health and Wellbeing to lead the Mental Health and Wellbeing Division in the Department of Health. Include in that law that this Chief Officer is:
 - a. delegated the role and powers of the Secretary of the Department of Health under the new Mental Health and Wellbeing Act (see recommendation 42)
 - b. appointed by and reports to the Secretary
 - c. at the level of a Deputy Secretary.
2. support the Chief Officer to be responsible for applying the Royal Commission's recommendations, unless the recommendation says otherwise.
3. transfer the roles of Mental Health Reform Victoria (which was set up in line with the Interim Report's recommendation 9) to the division by mid-2021.
4. make sure that the division employs people with lived experience of mental illness or psychological distress and people with lived experience of caring for someone living with mental illness. These people should be in significant roles including leadership positions.

Recommendation 46:**Managing government-wide efforts****The Royal Commission recommends that the Victorian Government:**

1. set up organisational structures to:
 - a. manage government-wide and community-wide approaches to improving mental health and wellbeing
 - b. oversee the implementation of the Royal Commission's recommendations.
2. make sure these organisational structures include:
 - a. a Mental Health and Wellbeing Cabinet Subcommittee that the Premier chairs for at least two years
 - b. a Mental Health and Wellbeing Secretaries' Board that the Department of Premier and Cabinet chairs. The board will include the Chief Officer for Mental Health and Wellbeing and the Secretaries of:
 - the Department of Health
 - the Department of Families, Fairness and Housing
 - the Department of Education and Training
 - the Department of Justice and Community Safety
 - the Department of Treasury and Finance
 - c. a Suicide Prevention and Response Secretaries' Board Subcommittee that the Department of Premier and Cabinet and the Department of Health co-chair. The State Suicide Prevention and Response Adviser (see recommendation 26(1)) will attend and support the board. It will be made up of all state government departments and relevant agencies, with Deputy Secretary and Secretary-level membership
 - d. an Interdepartmental Committee on Mental Health and Wellbeing Promotion that the Department of Premier and Cabinet and the Department of Health co-chair. The Mental Health and Wellbeing Promotion Adviser (see recommendation 2(1)) will attend and support the board. It will be made up of all state government departments and relevant agencies, with Deputy Secretary level membership.

Recommendation 47:

Planning the new mental health and wellbeing system

The Royal Commission recommends that the Victorian Government:

1. set up a process for assessing Victoria's need for mental health and wellbeing services. To start with, this will be done using an adjusted version of the National Mental Health Service Planning Framework.
2. develop and publish a statewide mental health and wellbeing service and capital plan as well as eight regional mental health and wellbeing service and capital plans. The Mental Health and Wellbeing Secretaries' Board (see recommendation 46(2)(b)) will approve the first plans by the end of 2022. They will approve the rest by the end of 2023.
3. update the statewide mental health and wellbeing service and capital plan every three years.
4. by no later than the end of 2026, support Regional Mental Health and Wellbeing Boards (see recommendation 4(2)) to update regional mental health and wellbeing service and capital plans every three years.

Recommendation 48:

Selecting providers and resourcing services

The Royal Commission recommends that the Victorian Government:

1. build on the Interim Report's recommendation 8 about a new approach to mental health investment. As well as use new service standards the Royal Commission developed to choose providers of mental health and wellbeing services. The government should also support Regional Mental Health and Wellbeing Boards (see recommendation 4(2)) to use the new service standards.
2. support the development of new and existing providers to meet the long-term goal of the service standards.
3. develop new ways of funding providers that encourage them to deliver mental health and wellbeing services that people with lived experience, families, carers and supporters' value. So that funding is fairly assigned through:
 - a. trialling then applying an activity-based funding model for both bed-based and community mental health and wellbeing services
 - b. working with the Collaborative Centre for Mental Health and Wellbeing to develop a way to bundle funding into one price for an evidence-informed pathway that is linked to improving outcomes
 - c. developing and trialling a capitation funding model. Capitation is a system that pays services a fee for each consumer they have enrolled in their service over a set time (usually one year). This will provide a tailored package for people with lived experience, families, carers and supporters.

Recommendation 49:

Monitoring and improving mental health and wellbeing services

The Royal Commission recommends that the Victorian Government:

1. set up a new framework to monitor service performance to:
 - a. hold mental health and wellbeing service providers to account and improve performance over time. It will also support Regional Mental Health and Wellbeing Boards (see recommendation 4(2)) to hold providers to account.
 - b. improve the outcomes and experiences of people with lived experience, families, carers and supporters
 - c. measure how effective mental health and wellbeing services are from the perspectives of people with lived experience, families, carers and supporters.

Recommendation 50:

Encouraging national partnerships

The Royal Commission recommends that the Victorian Government:

1. work with the Australian Government and the National Cabinet Reform Committee to:
 - a. explain the responsibilities of governments to work together through the new National Mental Health and Suicide Prevention Agreement
 - b. raise the profile of:
 - c. mental health, wellbeing and suicide prevention and response services
 - d. related supports such as housing and homelessness services
 - e. lived experience leadership.
 - f. make sure there is a focus on applying mental health and wellbeing strategies.

Recommendation 51:

Commissioning for integration

The Royal Commission recommends that the Victorian Government:

1. build on new ways of funding and monitoring mental health and wellbeing services (see recommendations 48 and 49). As well as support Regional Mental Health and Wellbeing Boards (see recommendation 4(2)) to:
 - a. fund one demonstration project in each region (see recommendation 3(3)). In the project a provider or providers deliver a range of services to people living with mental illness who need ongoing intensive treatment, care and support
 - b. fund demonstration projects in each region where a provider or providers deliver a range of services to people living with mental illness who need short-term treatment, care or support and who are in the 'missing middle'. The missing middle are a group of people who have needs that are too 'complex', too 'severe' and too 'enduring' for primary care to support them alone. However, these needs are not 'severe' enough for specialist mental health services
 - c. assess demonstration projects to help decide what approaches and providers meet the needs of communities and cover all ages
 - d. monitor provider partnerships with a focus on improving mental health and wellbeing outcomes.
2. along with the Regional Mental Health and Wellbeing Boards (see recommendation 4(2)), work with the Australian Government and Primary Health Networks to set up a funding approach for Australian Government and state-funded mental health and wellbeing services that:
 - a. builds on Australian Government and state planning methods for delivering mental health and wellbeing services
 - b. uses existing agreements including in the Addendum to the *National Health Reform Agreement 2020–2025*.

Recommendation 52:

Improving the quality and safety of mental health and wellbeing services

The Royal Commission recommends that the Victorian Government:

1. by no later than the end of 2021, set up a Mental Health Improvement Unit within Safer Care Victoria. This will give a multidisciplinary method to improving the quality and safety of mental health and wellbeing services.
2. support the Mental Health Improvement Unit to work with mental health and wellbeing services to:
 - a. provide leadership on improving quality and safety
 - b. provide professional, clinical and practice leadership for mental health and wellbeing services
 - c. promote awareness and understanding of high-quality service delivery across the mental health and wellbeing system
 - d. work with people with lived experience to design programs to improve quality and safety
 - e. produce practice guidelines and frameworks.

Recommendation 53:

Overseeing the quality and safety of mental health and wellbeing services

The Royal Commission recommends that the Victorian Government:

1. support the Mental Health and Wellbeing Commission (see recommendation 44) to monitor, investigate and report on system-wide quality and safety.
2. help the Mental Health and Wellbeing Commission to monitor, as a priority, the:
 - a. use of seclusion and restraint
 - b. use of compulsory treatment
 - c. rates of gender-based violence in mental health facilities
 - d. rates of suicides in healthcare settings.
3. support the Mental Health and Wellbeing Commission to:
 - a. work with the Department of Health and relevant watchdogs to build an understanding of quality and safety issues in mental health and wellbeing services
 - b. make sure that how complaints are handled and investigated:
 - meet the needs of people with lived experience, families, carers, and supporters
 - support services to solve issues
 - c. tell government about issues of concern and areas that need to be improved
 - d. record, report and publish complaints about services and other data and information.

Recommendation 54:

Getting rid of seclusion and restraint

The Royal Commission recommends that the Victorian Government:

1. reduce the use of seclusion and restraint in mental health and wellbeing service delivery immediately. With the aim to get rid of these practices within 10 years.
2. control the use of chemical restraint through law in the new Mental Health and Wellbeing Act (see recommendation 42(2)(e)).
3. make sure the Chief Officer for Mental Health and Wellbeing (see recommendation 45(1)) develops and leads a strategy to reduce the use of seclusion and restraint.
4. support the Mental Health Improvement Unit within Safer Care Victoria (see recommendation 52(1)) to work with mental health and wellbeing services and people with lived experience to design a range of programs and supports that focus on:
 - a. working with each mental health and wellbeing service to look at local data and practices to find areas that need change
 - b. making workforce training available for services
 - c. continuing to support services to use Safewards.

Recommendation 53:

Overseeing the quality and safety of mental health and wellbeing services

The Royal Commission recommends that the Victorian Government:

1. support the Mental Health and Wellbeing Commission (see recommendation 44) to monitor, investigate and report on system-wide quality and safety.
2. help the Mental Health and Wellbeing Commission to monitor, as a priority, the:
 - a. use of seclusion and restraint
 - b. use of compulsory treatment
 - c. rates of gender-based violence in mental health facilities
 - d. rates of suicides in healthcare settings.
3. support the Mental Health and Wellbeing Commission to:
 - a. work with the Department of Health and relevant watchdogs to build an understanding of quality and safety issues in mental health and wellbeing services
 - b. make sure that how complaints are handled and investigated:
 - meet the needs of people with lived experience, families, carers, and supporters
 - support services to solve issues
 - c. tell government about issues of concern and areas that need to be improved
 - d. record, report and publish complaints about services and other data and information.

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2. control the use of chemical restraint through law in the new Mental Health and Wellbeing Act (see recommendation 42(2)(e)).
3. make sure the Chief Officer for Mental Health and Wellbeing (see recommendation 45(1)) develops and leads a strategy to reduce the use of seclusion and restraint.
4. support the Mental Health Improvement Unit within Safer Care Victoria (see recommendation 52(1)) to work with mental health and wellbeing services and people with lived experience to design a range of programs and supports that focus on:
 - a. working with each mental health and wellbeing service to look at local data and practices to find areas that need change
 - b. making workforce training available for services
 - c. continuing to support services to use Safewards.

Recommendation 55:

Making sure compulsory treatment is only used as a last resort

The Royal Commission recommends that the Victorian Government:

1. make sure that the use of compulsory treatment is only used as a last resort.
2. set targets to reduce the use and length of compulsory treatment on a year-by-year basis. Gather and publish data about compulsory treatment in services and the system as a whole.
3. when giving money to mental health and wellbeing services, set the expectation that they will provide options for people living with mental illness or psychological distress that don't involve threats of or use of force. This includes for people at risk of compulsory treatment.
4. make sure the Mental Health Improvement Unit within Safer Care Victoria (see recommendation 52(1)) works with mental health and wellbeing services to:
 - a. increase opportunities for people with lived experience to take part and take the lead in all activities to reduce compulsory treatment
 - b. support the design and operation of local programs to reduce compulsory treatment
 - c. make workforce training available on options for treatment that don't involve threats of force. The training should be based on human rights and supported decision-making principles.

Recommendation 56:

Supporting people to exercise their rights

The Royal Commission recommends that the Victorian Government:

1. promote and protect the right of people living with mental illness or psychological distress to enjoy a high standard of mental health and wellbeing without discrimination.
2. include a law in the new Mental Health and Wellbeing Act (see recommendation 42) supporting people to access to non-legal advocacy services if they're facing compulsory treatment.
3. increase access to legal representation for people who go before the Mental Health Tribunal, particularly when repeated compulsory treatment orders are applied for.
4. bring mental health laws in line with other decision-making laws and encourage supported decision-making principles and practices.

Recommendation 57:

Workforce strategy, planning and structural reform

The Royal Commission recommends that the Victorian Government:

1. make sure that mental health and wellbeing services are delivered by a diverse, multidisciplinary mental health and wellbeing workforce that is big enough to meet the needs of the system across Victoria.
2. by the end of 2023, make changes to the structure of the workforce to:
 - a. attract, train and move staff to deliver services across Local, Area and Statewide Mental Health and Wellbeing Services (see recommendation 5)
 - b. develop new and improved roles as the Royal Commission described in its Final Report.
3. develop and maintain a Workforce Strategy and Implementation Plan so that, by the end of 2021, the Department of Health can:
 - a. organise ongoing workforce data collection, analysis and planning
 - b. set up a dedicated workforce planning and strategy task
 - c. work together with workforce stakeholders to implement recommendations.

Recommendation 58:

Workforce abilities and professional development

The Royal Commission recommends that the Victorian Government:

1. through the Department of Health, by the end of 2021, define the knowledge and skills a diverse, multidisciplinary mental health and wellbeing workforce needs. This should start with the priorities the Royal Commission described.
2. develop a Victorian Mental Health and Wellbeing Workforce Capability Framework as part of this.
3. explain how abilities will be developed across the mental health and wellbeing workforce as part of the workforce strategy and implementation plan.
4. build on the Interim Report's recommendation 1 and support the Collaborative Centre for Mental Health and Wellbeing to coordinate learning and professional development activities across the whole mental health and wellbeing workforce. This work should be done along with training providers, mental health and wellbeing services and people with lived experience.

Recommendation 59:

Workforce safety and wellbeing

The Royal Commission recommends that the Victorian Government:

1. by the end of 2021, set up an ongoing Mental Health Workforce Wellbeing Committee to look at occupational health and safety needs. The Department of Health and WorkSafe Victoria will co-chair the committee that will:
 - a. identify, monitor and tackle existing physical safety and wellbeing risks, as well as those that may come out of the reform process
 - b. develop processes to monitor the psychological health and safety of staff in the mental health and wellbeing workforce.
2. collaborate to set up clear expectations and a range of ways to support the wellbeing of the mental health and wellbeing workforce. Working together with:
 - a. service providers
 - b. workers (including lived experience workers)
 - c. unions
 - d. representative and professional bodies.
3. beginning in 2021, work with the Mental Health Workforce Wellbeing Committee to check workforce wellbeing at least once a year.

Recommendation 60:

Building an up-to-date system through digital technology

The Royal Commission recommends that the Victorian Government:

1. develop new statewide digital requirements for all publicly funded mental health and wellbeing service providers. These should list the minimum digital services every provider should offer to people with lived experience, families, carers and supporters.
2. support mental health and wellbeing service providers to use digital technologies, where safe and appropriate, through:
 - a. developing monitoring processes
 - b. providing funding
 - c. building the ability of mental health and wellbeing service providers to use digital technologies.
3. support mental health and wellbeing services to offer people living with mental illness or psychological distress access to devices, data and digital literacy support if they prefer to use digital services, but they aren't able to.

Recommendation 61:

Sharing mental health and wellbeing information

The Royal Commission recommends that the Victorian Government:

1. develop policies, standards and processes to effectively and safely collect and share mental health and wellbeing information.
2. set the expectation that mental health and wellbeing services will give people with lived experience opportunities to add to the information held about them and easily access it.
3. work with people with lived experience on a way to share information with mental health and wellbeing services and individuals outside of the system that involves their consent.

Recommendation 62:

Up-to-date information architecture

The Royal Commission recommends that the Victorian Government:

1. develop and fund up-to-date infrastructure for Information and Communications Technology (ICT) systems, including:
 - a. a new statewide electronic Mental Health and Wellbeing Record for mental health and wellbeing services. This will replace the current Client Management Interface/Operational Data Store (CMI/ODS) system
 - b. a review of the data items needed for service delivery and system administration. This will include removing unused items and adding new items that show mental health service activity and consumer outcomes
 - c. a new Mental Health Information and Data Exchange that allows the proposed Mental Health and Wellbeing Record and other services' major ICT systems to work together. This will support information sharing within and across services and sectors
 - d. a new user-friendly online consumer portal (web and mobile) connected to the Mental Health Information and Data Exchange. This will allow people to see key information about themselves and approve information to be shared with members of their care team, including families, carers and supporters
 - e. a data store and clinical register for mental health that will help:
 - measure outcomes
 - plan future services
 - make improvements
 - support mental health research.

Recommendation 63:

Supporting translational research and its distribution

The Royal Commission recommends that the Victorian Government:

1. building on the Interim Report's recommendation 1, by the end of 2023, support the Collaborative Centre for Mental Health and Wellbeing, to:
 - a. support translational research throughout the mental health and wellbeing system, including collaborating with other research centres and institutes. Translational research is a type of work that tries to bridge the gap between basic research and putting it into practice
 - b. make sure new research lines up with the reform priorities the Royal Commission identified
 - c. strengthen and support a formal network of academics responsible for sharing and applying research in service settings
 - d. make sure workforce education and training are based on evidence and promote innovation and learning
 - e. provide a 'clearing house' to collect, combine and share information from research, innovation projects and evaluations
 - f. provide authoritative advice on evidence-informed approaches to treatment, care and support to inform policy development, planning and investment.
2. find and promote opportunities to collaborate in translational research on the mental health and wellbeing of infants, children and young people.

Recommendation 64:

Driving innovation in mental health treatment, care and support

The Royal Commission recommends that the Victorian Government:

1. give money to an organisation to provide support and resources for innovation in mental health treatment, care and support.
2. fund this organisation to:
 - a. manage a mental health innovation fund for projects an expert panel select
 - b. set up collaborative networks to drive and support innovation in mental health treatment, care and support
 - c. provide practical support to services to use and test new approaches to mental health treatment, care and support.

Recommendation 65:

Evaluating mental health and wellbeing programs, initiatives and innovations

The Royal Commission recommends that the Victorian Government:

1. set an expectation that evaluation is a condition of funding for all new mental health and wellbeing programs, initiatives and innovations.
2. develop and fund a strategy to make sure evaluation informs reforms and ongoing decision-making about policies and investment.
3. promote and improve evaluation practices throughout the mental health and wellbeing system by providing guidance and access to evaluation experts.

