



## Fact Sheet

# Collaborative Centre for Mental Health and Wellbeing

### ... the current system is not geared for constant learning, improvement and change

so that it can meet the needs of service users and communities. The system finds difficulty in drawing on publicly funded researchers, quality improvement specialists, clinicians and people with lived experience to be part of the research process ... there is limited public investment in research and training and there is no coordination of outputs, priorities and desired research.<sup>1</sup>

- Alfred Health



There are two things we can do to champion the co-production of research and innovation in mental health. First,



### we can open up leadership roles for consumers

which means ... others will need to step back into support roles; and secondly, we can

### start elevating consumer leaders as thinkers and innovators.<sup>2</sup>

- Ms Cath Roper



A range of research organisations deliver valuable evidence on mental health and mental illness. However, there has not been

### a dedicated knowledge-sharing institute in Victoria

that has been able to bring together the latest thinking on how to deliver system-level change.<sup>3</sup>

- Kym Peake

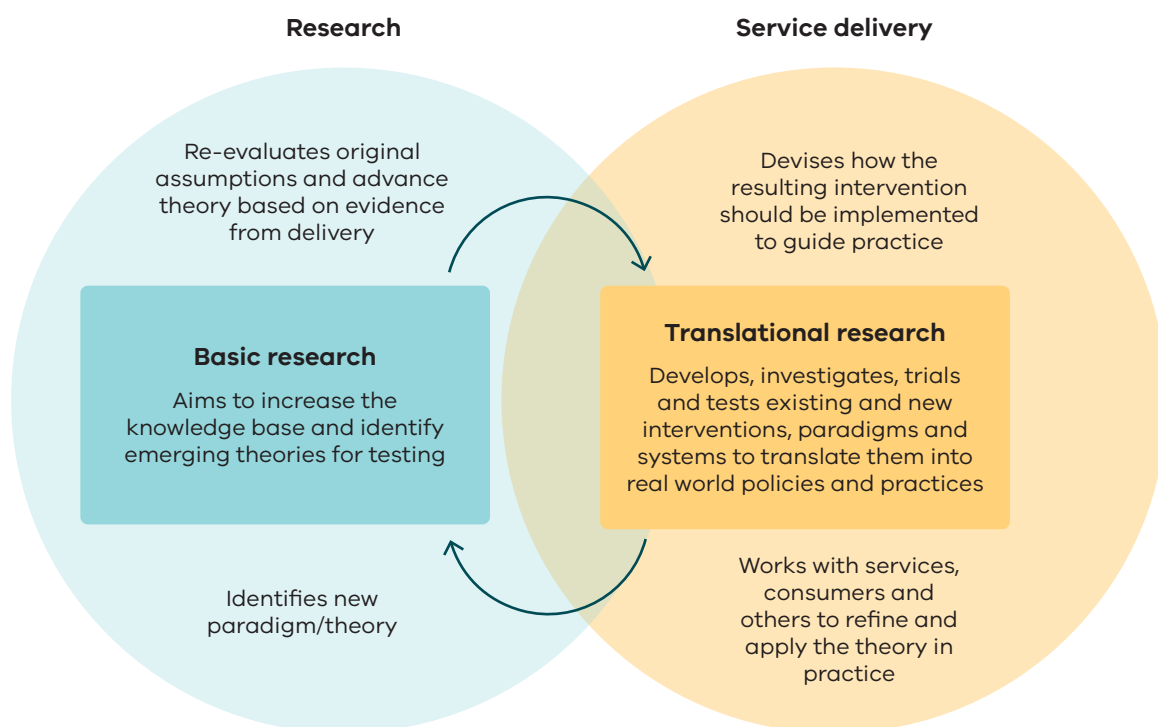
*The Commission's vision is for a modern and sustainable system that adapts and responds to Victorians' needs into the future. An adaptive system is one that can identify and test new ideas, gather evidence about what works, and translate this into effective treatment, care and support. It uses evidence about what works to continually improve professional practice, service design and system policy.*

The Victorian Collaborative Centre for Mental Health and Wellbeing (the collaborative centre) will boost the foundations for an adaptive mental health and wellbeing system, and meet a gap in translational research into treatment, care and support for adults and older people.

Led by a skills-based board and a multidisciplinary executive team, the collaborative centre will bring together people with lived experience, and a broad range of multidisciplinary experts and researchers to develop, translate and share best practice across the system.<sup>4</sup> The centre will work closely with a network of established research organisations and clinical academic leaders with the shared objective of making world-class treatment, care and support widely available across the state.

This reflects the importance and value of strong and committed leadership and partnership across governments, services and, importantly, from people with lived experience of mental illness or psychological distress, families, carers and supporters. All levels of government, service providers, the workforce, related systems and the community must work together.

**Figure 1:** Basic and translational research relationship



The collaborative centre will conduct interdisciplinary research alongside service delivery, reinforcing the translation of research and evidence into high-quality care through Regional Mental Health and Wellbeing Boards, including in rural and regional areas.

The purpose-built centre will provide comprehensive services to adults in its local community, including community-based and mobile home treatment, outpatient clinics, crisis responses and inpatient care. Non-clinical services will include family/supporter and group therapies, and wellbeing supports. Services will also integrate physical health care and support for substance use or addiction, to meet the holistic needs of people living with mental illness.

New links between statewide services and the collaborative centre, recommended in the Commission's interim report, will be established to take advantage of the centre's research and knowledge-sharing capabilities. The collaborative centre's functions make it ideally placed to support and, where appropriate, coordinate the delivery of statewide services for adults and older adults.

This includes a statewide Trauma Service that will provide direct service delivery for complex trauma cases; and training, supervision and secondary consultation for trauma practitioners across the state.

**There is a major gulf between where the mental health sector is and where it should be in terms of research. It is my hope that the proposed Collaborative Centre can partly serve as a role model in restoring the excellence and drive for innovation that is missing from public mental health.<sup>5</sup>**

- Professor Suresh Sundram

## Joint clinical academic positions

Clinical academics have been described as 'clinically active health researchers'. They work in health and social care as clinicians to improve, maintain or recover health while in parallel researching new ways of delivering better outcomes for the patients they treat and care for.

**Clinical academics also work in higher education institutions, while providing clinical expertise to health and social care. Because they remain clinically active, their research is grounded in the day-to-day issues of their patients and service. This dual role also allows the clinical academic to combine their clinical and research careers rather than having to choose between the two.<sup>6</sup>**

Clinical academic positions are designed to fulfil a number of leadership, clinical activity, training and research functions, including:

- raising the profile and prestige of mental health services
- improving the quality of services
- undertaking high-quality research and disseminating research findings
- seeking to effectively translate research, knowledge and outcomes into practice
- contributing to the recruitment and retention of quality staff
- providing clinical leadership to the Victorian mental health workforce.<sup>7</sup>

The introduction of the first clinical academic positions created some of Victoria's most influential mental health leaders and voices in the system.<sup>8</sup>

The collaborative centre will collect high-quality data and learning from research, evaluations and innovation within a 'clearing house', and publish authoritative guidance about proven and effective treatment, care and support. This will inform policy development and investment at the system level, and service design and commissioning by Regional Mental Health and Wellbeing Boards. It will also provide a source of reliable and contemporary information to local, area and statewide services, the new Mental Health and Wellbeing Commission, innovators and the general public.

The collaborative centre will lead exemplary practice for the full and effective participation and inclusion of people with lived experience across the mental health system. People with lived experience will be integral to supporting evidence-informed professional practice through the centre's role in coordinating training and professional development programs for mental health workforces across the system.

Establishing the collaborative centre, and building strong and diverse networks of research expertise, will put Victoria in a strong position to attract and secure research funding, and grow its reputation as a research leader.

Comprehensive and collaborative centre models have been adopted globally to advance efforts to improve life expectancy and develop responses to pressing health challenges in areas such as cancer, cardiac disease and communicable diseases. These models are based on the idea that integrating people and organisations that have a shared purpose—a specific disease or health challenge, for example—will produce greater benefits more rapidly than an individual or a single organisation could achieve alone.<sup>9</sup>

**Delivering mental health services successfully is above all an adaptive challenge ...**

**An adaptive response to the changing needs of the client requires interventions that take into consideration the priorities of different stakeholders and lead to a common understanding of what thriving entails...**

**It builds on the past, changes through experimentation, draws in diverse perspectives, and ultimately discards tightly held beliefs ...<sup>10</sup>**

- Associate Professor Simon Stafrace



**This novel approach is already changing the way we tackle cancer in Victoria. The VCCC's success has been driven by commitment to a shared goal: to deliver better outcomes for Victorians. It is this collective focus that enables system level change and makes this alliance greater than the sum of its parts.<sup>11</sup>**

- Victorian Comprehensive Cancer Centre



## Recommendations

- ✓ The Victorian Collaborative Centre for Mental Health and Wellbeing will be a purpose-built facility in Melbourne, established to lead research into new treatments and models of care and support, translate them into practice throughout the mental health and wellbeing system, and inform service delivery, policy and law making (Recommendation 1 – Interim report).
- ✓ The collaborative centre will bring people with lived experience together with researchers and experts in multidisciplinary clinical and non-clinical care to develop and provide mental health services for adults and older people, conduct research and disseminate knowledge through a network of partners including service and research organisations in rural and regional areas.
- ✓ Alongside comprehensive services to adults in its local community, the collaborative centre will provide specialist services that focus on treatment, care and support for people living with complex conditions (see interim report Recommendation 1). These will include a statewide Trauma Service to deliver the best possible mental health outcomes for people of all ages with lived experience of trauma (see Recommendation 23).
- ✓ The collaborative centre will support a formal network of academic service leaders responsible for sharing and applying research in service settings (see Recommendation 63). It will also ensure that evidence informs workforce training and practice across the system, and will co-ordinate learning and professional development activities across the whole mental health and wellbeing workforce (Recommendation 58).
- ✓ Authoritative advice on evidence-informed approaches to treatment, care and support will be published by the collaborative centre as a 'clearing house', collecting, combining and sharing information from research and other sources to inform government and service policy development, planning and investment (see Recommendation 63).
- ✓ This work will include engaging with the Victorian government to develop and implement an approach to bundling funding into one price for an evidence-informed pathway that is linked to improving outcomes (see Recommendation 48).

<sup>1</sup> Alfred Health

<sup>2</sup> *Witness Statement of Cath Roper*, 2 June 2020, para. 31.

<sup>3</sup> *Witness Statement of Kym Peake*, 24 July 2019, para. 84.

<sup>4</sup> Royal Commission into Victoria's Mental Health System, *Interim Report*, p. 391.

<sup>5</sup> *Witness Statement of Professor Suresh Sundram*, 19 May 2020, para. 159.

<sup>6</sup> D Carrick-Seb and others, *Transforming Healthcare through Clinical Academic Roles in Nursing, Midwifery and Allied Health Professions: A Practical Resource for Healthcare Provider Organisations* (The Association of UK University Hospitals, 2016), p. 9.

<sup>7</sup> Department of Human Services, 'Policy Framework: Clinical Academic Positions and Activity 2004-09', 2004, p. 2 <[www.yumpu.com/en/document/read/9047501/policy-framework-clinical-academic-positions-and-activity-2004](http://www.yumpu.com/en/document/read/9047501/policy-framework-clinical-academic-positions-and-activity-2004)> [accessed 26 October 2020].

<sup>8</sup> *Witness Statement of Professor Emeritus Bruce Singh AM*, 23 July 2020, para. 14.

<sup>9</sup> Royal Commission into Victoria's Mental Health System, *Interim Report*, 2019, p. 342.

<sup>10</sup> *Witness Statement of Associate Professor Simon Stafrace*, 2020, paras. 51 and 53, citing Heitetz R Grashow A and Linsky M, *The Practice of Adaptive Leadership. Tools and tactics for changing your organisation the world* (Harvard Business Press, 2009).

<sup>11</sup> Royal Commission into Victoria's Mental Health System, *Interim Report*, 2019, p. 398.

